

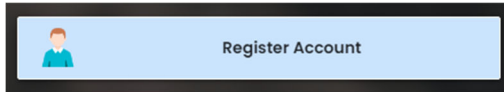
Welcome to the Metropolitan Sewer District of Greater Cincinnati (MSD) GovOnline Public Portal. MSD nonresidential customers, commercial customers or Industrial Users can use this portal to enter applicable form information. These forms include:

Auxiliary Sewerage Meter (S-Meter)
Dental Dischargers One-Time Compliance Report
Food Service Operation
Hauler Waste Generators
Manufacturing Operations

Medical Operations
Sewer Use Customer Application
Special Wastewater Discharge
Vehicle Maintenance Operations
Waste Hauler Registration

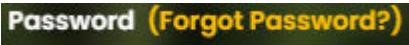
REGISTER YOUR ACCOUNT

If you do not have a registered account, please create one by clicking on the **Register Account** button on the login page. Create an **Authorized Rep** account type. After completing your account registration, you should receive a **Username**, **Password**, and **PIN**. You will need the **Username and Password** to log in to the Portal, and the answers to the **Security Questions** and **PIN** to make an application submittal.



LOGIN

If you have a registered account, enter your **Username** and **Password**.
If you forgot your **Password** or **Username**, click on the **Password (Forgot Password)** link to reset your Password.



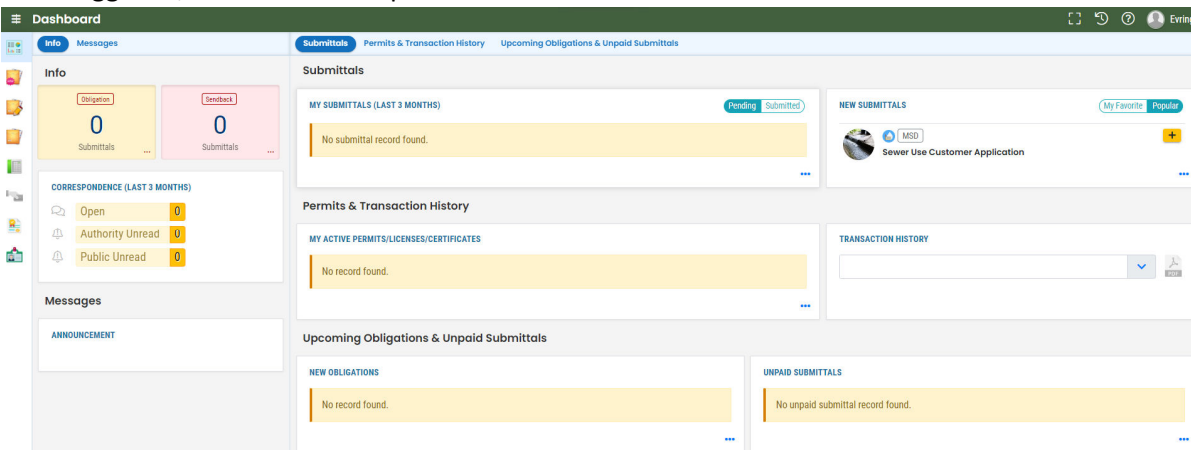
For further assistance, you can contact the MSDGovOnline Help Desk:


Email: msd.govonline@cincinnati-oh.gov


Phone: (513) 557-7000




DASHBOARD


Once logged in, the Dashboard opens:





Click on the **Navigation** button, , at the top left of the screen next to the word "Dashboard". This will open up the Main Menu or show the titles of menu icons on the left side of the screen.


If you don't have your account set up, click on the **My Account** button, , on the lower left side menu and complete the applicable information. Once an **Authorized Rep** account type is set up under the **Account Type** tab, the user can complete and submit application forms.

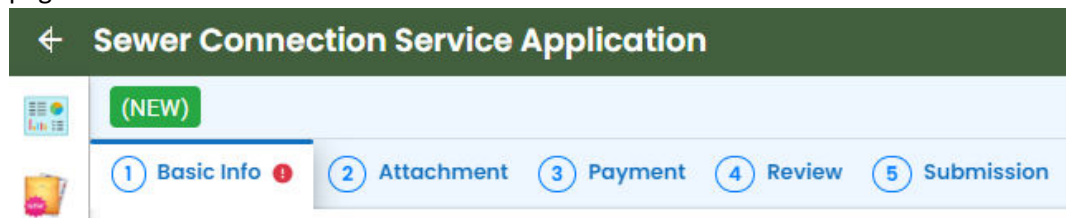
Click on the  icon on the top right of the screen to access your basic account information or to Logout of the portal by clicking on  icon or click on the  icon to edit your account.



Clicking on the  icon displays the help document or the MSD GovOnline Public Portal User Guide.

Clicking on the  icon, toggle the full screen mode.

Clicking on the  icon, display your Timeline (Activity History) on the portal.

After returning to the Dashboard, click on  icon on the upper right side of the screen under the NEW SUBMITTALS area to enter a Sewer Use Customer Application form under the Sewer Connection Service Application page.



All 5 steps or tabs, under **Sewer Connection Service Application**, is the default. More forms and applicable attachment can be added based on the Facility operations checked on the Basic Info page. All forms and required attachment must be completed to submit an application form. The  icon means that required information is missing and needs to be entered to complete the form. Note that it is free to submit an application and **Payment** is not required to submit an application form, therefore **Payment** should always be **\$0.00**. Click on the  icon for more information.

FORMS



Basic Information tab

Enter **General Business Information** by first entering:

- Business Name (as registered with [Ohio Secretary of State](#))
- Select Yes or No if the facility has been registered with MSD before.
- Facility Name
- Search for existing Physical Location by entering search info into the textbox with the magnifying glass. Receive better results by entering house number, and street name only (i.e. 1600 Gest).
- Phone, Fax, Email
- Website

Business Mailing Address

- Address or house number and street name | Unit, Suite, or Floor #
- City | State | Zip Code

Name and Title of Duly Authorized Representative

- First Name | M.I. | Last Name
- Title | Email
- Phone

Name and Title of Contact Person (responsible for day-to-day operations of this facility)

- Salutation | First Name | M.I. | Last Name

- Title | Email
- Phone
- Address or house number and street name | Unit, Suite, or Floor #
- City | State | Zip Code

MSD Customer (name that appears on the water/sewer bill)

- First Name | M.I. | Last Name
- GCWW/MSD Account Number

Name of Person MSD Should Contact Regarding This Form

- FirstName | M.I. | Last Name
- Title | Email
- Phone

Basic Business Information

Please select why you are submitting this application to MSD. Select all that apply.

- Request By MSD | Permit Renewal | Building / Plumbing Permit | Contact Information Update |

Applying for Auxiliary Sewerage Meter (S-Meter)

Human Occupancy: (Check all that apply)

- Retail
- Office
- Warehouse
- Type of warehouse

Facility Operations: (Check all that apply)

- b). Food service operations (select all that apply)
- Lunchroom/break room – Food prepared on site by facility occupants for self-consumption
- Cafeteria – A dependent food service prepared on site primarily for employees/occupants
- Restaurant – An independent operation for occupants, visitors, and customers
- Commissary / Catering
- N/A

EXAMPLE FORM



Food Service tab

FSO Addendum - Business Description for Food Service Operations

1. Type of food service facility (check all that apply)
Bakery | Bar | Cafeteria | Catering | Coffee Shop | Commissary | Deli | Fast Food | Food Packager | Full Service Dine-in | Ice Cream Shop | Meat Processor | Prepared Food Assembly | Take Out | N/A | Other
2. Location of food service facility (check all that apply)
Club/ Organization | Company/ Office Building | Hospital | Hotel/ Motel | Mall/ Food Court | Nursing Home | Prison | Religious Institution | School | Stadium/ Amusement Park | Stand-alone Restaurant | Strip Mall(attached) | Supermarket | N/A | Other
3. Major equipment used for food preparation at this facility (check all that apply or submit a copy of your company's equipment schedule)

Buffalo Chopper | Charbroiler | Deep Fat Fryer | Flat Top Range | Griddle | Grill | Jacketed Kettle | Oven | Rotisserie | Smoker Stove | Tilt Kettle | Warming Drawer | Wok | N/A | Other

4. Fixtures in the bar, kitchen, cleanup, and food prep areas (check all that apply)

3-Compartment Sink | Bar Sink | Dishwasher | Disposer | Floor Drain | Flushing Rim Sink | Flush Valve Sink | Hand Sink | Mop Sink | Pre-Rinse Sink | Prep Sink | Service Sink | N/A | Other

5. Operation information

a) Date restaurant began operating (mo/yr)

b) Size of business operation (square feet)

c) Number of seats in dining room

d) Take out/delivery only Dine-in only Both

e) Average number of employees

f) Expected daily average number of meals

g) Do you wash plates? Yes or No

h) Days Open - | Select All | Sunday | Monday | Tuesday | Wednesday | Thursday | Friday | Saturday

i) Hours of - | Breakfast | Lunch | Dinner | Evening | All Night

j) Best time for inside inspections

FSO Addendum - Waste Management for Food Service Operations

Trash / Solid Waste Disposal

1) Type of collection receptacle (check) Cans | Dumpster | Compactor | Other

2. Location of collection receptacle

3. Frequency of pick-up

4. Trash removal service (business name and address)

Business Name

Address or house number and street name | Unit, Suite, or Floor #

City | State | Zip Code

5. Contact name and telephone number

FirstName | M.I. | Last Name

Email

Phone


6. Do you share the use of the trash receptacle? Yes or No

7. Cooking Oil Disposal - Frequency of pick-up for

Collection Receptacle | Buckets/Drums | Dumpster | Collection System

Grease Control Device (Trap or Interceptor) Yes or No (If Yes is selected, then enter applicable information below the Grease Control Device (Trap or Interceptor)

Name/Type | Location | Size | Unit | Frequency of Cleaning | Person who Cleans

Click on the  icon to add additional grease control devices

8. Grease control device service contractor (business name and address)

Business Name

Address or house number and street name | Unit, Suite, or Floor #

City | State | Zip Code

9. Contact name and telephone number

FirstName | M.I. | Last Name

Phone

10. Briefly describe storage areas for chemicals and liquid materials such as boiler treatment, cooking oil, gasoline, oil, paint, sanitizers, as well as any spill protection devices in use at the facility.

11. Is there a privately owned manhole for collecting a wastewater sample? Yes | No

ADDITIONAL TABS AT THE TOP OF THE Sewer Connection Service Application PAGE

3 Attachment

Attachment tab - (This is optional). If you attach an attachment, you must select a **Document Type**.

4 Payment

Payment tab - (Skip this. It should be \$0.00)

5 Review

Review tab - Review your application/submittal for any missing, incomplete or Required (**Required**) information

6 Submission

Submission tab - (Answer all applicable questions and click on the **Submit** button to submit your application form).

You should receive an email stating that your form has been submitted successfully for review and subsequently final approval. If there is a problem with your submittal, it may be sent back to you, in your portal account, for more information or correction. Once the form is approved by MSD, you will get an email stating that the application is approved.

GovOnline Helpdesk Contact:

For Assistance, please contact the Metropolitan Sewer District of Greater Cincinnati (MSD) GovOnline Helpdesk:

Email: msd.govonline@cincinnati-oh.gov

Phone: (513) 557-7000

MSDGC GovOnline Public Portal Flow Chart

