TOWN OF SUNDERLAND RESIDENTIAL / COMMERCIAL BUILDING SEWER APPLICATION

Applicant Name:		
Applicant Current Address	(Please Print)	
Company Name: (if applica	ible)	
Telephone:		
The undersigned being the _		of the property located at
	(Owner / Owner & Agent)	, does hereby request a permit to
,	Lot identification and Street Address)	, J 1
at said location. **If this is a		(Residence, Commercial Bldgs., Etc.) an must be submitted with application. A License
The following indicated fixtu	ares will be connected to the p <u>Quantity / F</u>	÷
	Kitchen Sink(s)	Laundry Tubs
	Garbage Disposals	Bathtubs
	Toilets	Showers
	Urinals	Other
**Specify õotherö fixtures:		

The following information is required:

- 1. Total square footage: _____
- 2. The average number of persons who will use the above fixture(s): _____
- 3. The name and address of person or firm who will perform the proposed work: _____
- 4. Include two (2) copies of plans and specifications for the proposed building sewer are attached hereunto as Exhibit õAö. Plans must include a locus map, sewer tie-in elevations and detail.
- 5. Plans for forced main systems must include tank size, GPM/flow rates, alarm descriptions, and PE stamp.
- 6. A certified list of abutters must be obtained from the Assessors, and notices to abutters must be mailed by the applicant or applicant designee prior to action by the Sewer Commissioners.

(two-sided document →)

RESIDENTIAL / COMMERCIAL BUILDING SEWER APPLICATION

Page 2

In consideration of the granting of this permit, the undersigned agrees:

- 1. To accept and abide by all provisions of the Town of Sunderland Sewer Regulations and by-laws, and all other pertinent by-laws and regulations that may be adopted in the future.
- 2. To maintain the building sewer at no expense to the Town.
- 3. To notify the WWTP Operator and the Highway Superintendent when the building sewer is ready for inspection and connection to the public sewer, but before any portion of the work is covered.

Application for:	(Assessorøs Map & Lot identification and St	reet Address)
Applicant:	(Signature)	Date:
Sewer Commissioner	rs:	
	Approved / Disappro	yadı. Data
	Approved / Disappro	ved: Date:
Inspected by:	(Waste Water Treatment Plant Designee)	Date
Cc: WWTP Opera Highway Sup		
Form approved by Se Amended: 08.08.11,		