

SEWER PERMIT APPLICATION

Parcel Assessor's Parcel Number(s): _____ Lot(s): _____ Block: _____

Data: Address/Location: _____

Owner: Name(s) _____ Phone #: _____

Address: _____ Cell #: _____

Email Address: _____

Agent: Name(s) _____ Phone #: _____

Address: _____ Cell #: _____

Email Address: _____

Contractor: Name _____ Email Address: _____

Address: _____ Cell #: _____

Project Type: (Check one)

New Construction _____ Remodel/Addition _____ Demolition _____ Mainline Ext. _____

Project Description: (Check all that apply)

Single Family Dwelling _____

Multiple Family Residential _____

Auxiliary Dwelling Unit (ADU) _____

Hotel/Motel, Condo, or B&B _____

Commercial Building or Warehouse _____

Mixed Use (Commercial & Residential) _____

Other _____ Explain: _____

General Information: (Complete applicable sections)

Parcel Sq. Ft.: _____ Total Living Area Sq. Ft.: _____ Garage Sq. Ft.: _____

No. of Bedrooms: _____ No. of Baths: _____ No. of Offices: _____ No. of Living Units: _____

If more than one living unit, list sq. ft. for each: _____

No. of Trees to be Removed: _____ Is tree removal for lateral placement? _____

Additional Comments: _____

In consideration of granting this permit, the undersigned agrees:

1. To accept and abide by all provisions of the District Code.
2. To leave trench open and notify the District when sewer is ready for connection to the sewer main line.
3. In the event that all required planning approvals are not final, the application shall be deemed incomplete, and any permit issued may be revoked.
4. To provide the District with the final Building Plans for this project if requested, prior to permit issuance.

Signature: _____ **Print Name:** _____ **Date:** _____

FOR DISTRICT USE ONLY (Please do not write below this line)

<input type="checkbox"/> Planning Approval Letter	<input type="checkbox"/> Pick up Notice	<input type="checkbox"/> Print Assessor's Map
<input type="checkbox"/> Grant Deed/Legal Description	<input type="checkbox"/> Is Application Complete?	<input type="checkbox"/> Print ML Map
<input type="checkbox"/> Plans/Elevations	<input type="checkbox"/> Is there a ML to serve?	_____ Asmts. on parcel
<input type="checkbox"/> Plumbing Plans showing Sewer	<input type="checkbox"/> Print Asmt. Verification	_____ Asmts. needed
<input type="checkbox"/> Topographical Map	Zoning Dist.: _____	Received on: _____
<input type="checkbox"/> Agent Form	Application Fee \$ _____	By: _____ (Date)