

WASTEWATER SYSTEM CONNECTION APPLICATION

NAME:

DATE:

ADDRESS:

TELEPHONE:

Property for which application is being made;

ADDRESS:

MAP

LOT

The property is (check one)

1. _____ New residential construction with _____ unit(s)
2. _____ Existing residential structure, expanding from _____ unit(s) to _____ unit(s)
3. _____ Existing residential structure with septic system being converted to town sewer
4. _____ Conversion from apartment to commercial or commercial to apartment
Explain: _____
5. _____ New commercial or industrial construction with an estimated water usage of _____ gallons per day
6. _____ Existing commercial or industrial structure is expanding (or changing use) for housing units.
Its water usage from _____ GPD to _____ GPD.

Is a building permit required? _____ YES _____ NO

Signature: Public Works Director or Agent

Signature: Applicant

_____ CONNECTION FEE AMOUNT _____ Date Paid

Water Meter Size _____ Permit # _____

PRIOR TO INSTALLATION, OWNER MUST CALL THE TREATMENT PLANT AT 444-5400 TO SCHEDULE INSPECTION OF THE SEWER SERVICE INSTALLATION.

The Town of Littleton prohibits discrimination on the basis of race, color, national origin, sex, sexual orientation, religion, age, disability, marital or family status.

The Town of Littleton is an equal opportunity employer.

Because the Town of Littleton receives Federal Funding, we ask you indicate the group that applies to you:

___ American Indian/Alaskan Native ___ Asian ___ Black or African American
___ Native Hawaiian or Other Pacific Islander ___ White

Completion of this portion of the application is voluntary, failure to complete this section will not effect the issuance of the permit