



RESIDENTIAL SEWER CONNECTION APPLICATION

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|---|--|
| Site Address: | |
| City/State: | Zip: |
| Parcel Number: | |
| Property Owner's Name: | |
| Address: | |
| City/State: | Zip: |
| Phone: | Email: |
| Tenant's Name: | |
| Address: | |
| City/State: | Zip: |
| Phone: | Email: |
| Contractor's Name: | |
| Address: | |
| City/State: | Zip: |
| Phone: | Email: |
| Labor & Industries License/Exp. Date: | City License: |
| Occupancy Use (check all that apply): | |
| <input type="checkbox"/> Single-Family | <input type="checkbox"/> Multi-Family |
| <input type="checkbox"/> Office | |
| <input type="checkbox"/> Retail | <input type="checkbox"/> Church |
| <input type="checkbox"/> Storage | |
| <input type="checkbox"/> School | <input type="checkbox"/> Other (describe): |
| By affixing my signature hereto, I certify that I am the owner, or am acting as the Owner's authorized agent, and that the application and documents contained with this submittal are complete and accurate to the best of my knowledge and abilities. | |
| Signature of Owner/Agent: | Date: |
| Project Contact: | Telephone Number: |

| APPLICATION CHECKLIST: | |
|---------------------------------------|--------------------|
| No. to be Submitted: | Item Description: |
| 1 | Application |
| 2 | Site Plan |
| 2 | Construction Plans |
| | Other |
| STAFF NOTES: (CONDITIONS/COMMENTS) | |
| | |
| PERMIT FEES: | |
| Engineering Fees: | |
| Capacity Change: | |
| Expansion Charge: | |
| Other: | |
| Total Fees: | |

Note: As-Builts will be required before this permit can be finalized.