



# Permit Application

Account Number \_\_\_\_\_ Permit No. \_\_\_\_\_

**Permit Applicant Please Fill Out The Following Information:**

|                                                                                         |                                                                                            |                                                                         |                                                             |
|-----------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------|-------------------------------------------------------------------------|-------------------------------------------------------------|
| <b>Property Owner Information</b>                                                       |                                                                                            |                                                                         |                                                             |
| Name:                                                                                   |                                                                                            | Phone:                                                                  | Email:                                                      |
| Mailing Address:                                                                        |                                                                                            |                                                                         |                                                             |
| <b>Property Location Information:</b>                                                   |                                                                                            |                                                                         |                                                             |
| Physical Address:                                                                       |                                                                                            |                                                                         |                                                             |
| <b>Contractor Information:</b>                                                          |                                                                                            |                                                                         |                                                             |
| Name:                                                                                   |                                                                                            | Phone:                                                                  | Email:                                                      |
| Mailing Address:                                                                        |                                                                                            |                                                                         |                                                             |
| <b>Connection Information (check applicable)</b>                                        |                                                                                            |                                                                         |                                                             |
| <input type="checkbox"/> Single Family Residential                                      | <input type="checkbox"/> Multifamily or Apartments<br>If Yes # of units: _____             | <input type="checkbox"/> Office, Retail, or School                      |                                                             |
| <input type="checkbox"/> Restaurant or Food Processing<br>(requires grease interceptor) | <input type="checkbox"/> Government                                                        | <input type="checkbox"/> Other - Describe                               |                                                             |
| Type Connection:                                                                        | <input type="checkbox"/> Sanitary                                                          | <input type="checkbox"/> Stormwater                                     | <input type="checkbox"/> Catch Basins – If Yes # of Basins: |
| Air Testing:                                                                            | <input type="checkbox"/> To Be Completed By Contractor<br>Under The District's Observation | <input type="checkbox"/> To Be Completed By District Personnel<br>(Fee) |                                                             |
| <input type="checkbox"/> Other (Describe):                                              |                                                                                            |                                                                         |                                                             |

I certify that all of the information provided is correct and agree with the terms and conditions expressed on both sides of this permit application.

Printed Name: \_\_\_\_\_ Signed: \_\_\_\_\_ Date: \_\_\_\_\_

|                                   |                                                |                                      |
|-----------------------------------|------------------------------------------------|--------------------------------------|
| <b>OFFICE USE</b>                 |                                                |                                      |
| <input type="checkbox"/> Approved | <input type="checkbox"/> Disapproved – Reason: | TOTAL FEES:<br>(See Back of Form) \$ |
| Approved By:                      |                                                | Date:                                |

**FEES**

| Y/N | Storm Sewer Connections                                                                                                                    | QTY | Fee   | Total Due   |
|-----|--------------------------------------------------------------------------------------------------------------------------------------------|-----|-------|-------------|
|     | Catch Basins - \$30.75 per quarter per basin quarterly                                                                                     |     | QTLY  | Billed QTLY |
|     | New Construction – Stormwater Connections                                                                                                  |     | \$300 |             |
|     | Disconnecting Existing Storm Water Connections from the Districts Sanitary System and Connecting them the District's Storm Drainage System |     |       | No Fee      |

| Y/N | Sanitary Sewer Connections                                        | Fee       | Total Due |
|-----|-------------------------------------------------------------------|-----------|-----------|
|     | New Service or Service Repair Requiring a New Sanitary Connection | \$300     |           |
|     | Wastewater Availability Fee (a.k.a. the Ready to Serve Fee)       | See Below |           |
|     | Air Testing – Residential (if done by District personnel)         | \$106     |           |
|     | Air Testing – Commercial (if done by District personnel)          | \$158     |           |

**Wastewater Availability Fee ( a.k.a. the Ready To Serve Fee) Calculation**

| Y/N | Type                                                                                                                                        | QTY | Fee          | Total Due |
|-----|---------------------------------------------------------------------------------------------------------------------------------------------|-----|--------------|-----------|
|     | Residential                                                                                                                                 |     | \$480        |           |
|     | Apartments                                                                                                                                  |     | \$350 / Unit |           |
|     | Office, Retail or School 7.5 gallons/100sf X \$2.00/gallon<br>7.5 gallons/ _____ (100 sf) X \$2.00/gallon=                                  | sf  |              |           |
|     | Any other \$2/gallon per day (PE design avg use)<br>\$2 per gallon X _____ gallons per day =                                                | gal |              |           |
|     | If above is not available use State Plumbing Code ERU<br>equivalents at 240 gallons per ERU.<br>240 Gallons X _____ ERUs X \$2 per gallon = | ERU |              |           |

|                                                                                        |  |
|----------------------------------------------------------------------------------------|--|
| <b>Total Fees</b> (transfer number to page 1 of this form in the "Office Use" section) |  |
|----------------------------------------------------------------------------------------|--|

**Permit Terms and Conditions:**

- The District must approve all sanitary and/or storm systems plus appurtenances prior to installation and connection.
- Only one unit/owner per connection is allowed.
- No clean water connections (sump pumps, roof drains, under drains, catch basins, etc.) are allowed to connect to the District's sanitary system.
- Sanitary sewers must be inspected, air tested, and manholes properly sealed **prior to connection**.
- All food processing facilities will install a grease interceptor (sized by a certified professional) and approved by the District. **A copy of the certified sizing must be attached to the permit.**
- The permittee must accept and abide by all provisions of such "Rules & Regulations" as may be adopted by the Waterville Sewerage District under the authority of Chapter 211, P&S Laws of 1049, as amended. To meet the "General Specifications for Sewerage Construction" by the District. Failure to follow the "Rules and Regulations" and "General Specifications for Sewerage Construction" of the District will mean a refusal on the next application for sewer connection and possible legal action
- The permittee must notify the District 72-hours prior to construction.
- Connections will be made between 7:00 A.M. and 3:00 P.M. Monday through Friday, except holidays.
- The permittee will maintain the building sewer at no expense to the District.
- The permittee will follow proper Dig Safe procedures prior to excavation.

Please call the District if you have questions at (207) 873-5191 or send an email to the Superintendent at [tjmitchell@watervillesd.com](mailto:tjmitchell@watervillesd.com)