



# Board of Sewer Commissioners - Hooksett Wastewater Treatment Facility



## RESIDENTIAL & COMMERCIAL SEWER CONNECTION PERMIT

### PROPERTY LOCATION

MAP: \_\_\_\_\_ LOT: \_\_\_\_\_ SUBDIV: \_\_\_\_\_ MAILING ADDRESS: \_\_\_\_\_

RESIDENTIAL \_\_\_\_\_ COMMERCIAL \_\_\_\_\_

New Hookup \_\_\_\_\_ Change of Use \_\_\_\_\_

Will this property have an accessory/in-law apartment? Yes No

*If yes, additional permit and system development fees are required.*

Will property be using an irrigation system? Yes No

If yes, is a deduct meter being installed? Yes No

### OWNER/BUILDER INFORMATION

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY /STATE/ZIP: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

TELEPHONE #: \_\_\_\_\_

### THE UNDERSIGNED AGREES TO THE FOLLOWING:

1. To accept and abide by ALL Sewer Ordinances.
2. To maintain the sewer connection at no expense to the Town.
3. All sewer inspections are to be scheduled with **24 hour notice**, Monday through Friday only, between the hours of 9:00 AM and 3:00 PM. There are no inspections Saturday, Sunday or any Town Holiday.
4. Any inspection that must be performed after 3:00 PM Monday through Friday will be levied an additional \$50 inspection fee.
5. No portion of the trench will be covered until it has been inspected by the Superintendent/Staff or authorized agent of the Hooksett Wastewater Treatment Facility
6. All plans/additional information requested by the Superintendent will be submitted in a timely manner.
7. A backflow device must be installed on ALL sewer services.
8. A clean out must be installed at the property line and a map of its location submitted to the Superintendent.
9. This permit is valid **6 months from date of issue**. If the project does not start within this time frame another permit must be obtained and paid for.

\_\_\_\_\_  
*Signature of owner or authorized agent*

\_\_\_\_\_  
*Date*

\$ \_\_\_\_\_ Permit Fee Pd      Cash/Check #: \_\_\_\_\_      Received by: \_\_\_\_\_

\$ \_\_\_\_\_ SDF Fee Pd      Cash/Check #: \_\_\_\_\_      Received by: \_\_\_\_\_

**Sewer Line Service Inspection:**      Performed by: \_\_\_\_\_      Date: \_\_\_\_\_

**Backflow/FINAL Inspection:**      Performed by: \_\_\_\_\_      Date: \_\_\_\_\_

Property has been inspected and has abided by all conditions stated above.

\_\_\_\_\_  
Authorized signature for HWWTF

\_\_\_\_\_  
Date

Total # of Units: \_\_\_\_\_      Account #: \_\_\_\_\_