

Acct # _____

TOWN OF DUANESBURG APPLICATION FOR PERMIT TO CONNECT TO PUBLIC SEWER

(A Separate Permit is required for each building to be connected)

The Owner or Contractor must Call 1-800-962-7962 at least 48 hours before beginning excavation in order to allow for marking of any underground utilities.

FOR OFFICE USE ONLY - DO NOT WRITE IN THIS SPACE

Application No. <u>S-</u> _____	Subject Property	Permit No. <u>S-</u> _____
Date Filed: _____		Date Issued: _____
Application Fee: \$ _____	<input type="checkbox"/> Residential <input type="checkbox"/> Commercial <input type="checkbox"/> Industrial Property: _____ EDU's _____	Tax Map ID #: _____

1. Property Owner Information: Owner Name (s) _____

Mail Address: _____

Mail Address: _____

Home Phone: _____ Work Phone: _____

2. Applicant Information: (Complete Only if Applicant is different from Owner)

Applicant's Name: _____ Home Phone: _____

Mail Address: _____ Work Phone: _____

Compensation Carrier: _____ General Liability Carrier: _____

Policy # _____ Policy # _____

3. Existing Property Information: (Property where work is to be performed)

Location of Property (911 Address): _____ Tax Map ID # _____

The following improvements are **currently located on the property** (Check all that apply):

_____ Single Family Residence	_____ (1)(2)(3) car attached garage
_____ Two-Family Residence	_____ (1)(2)(3) car <u>detached</u> garage
_____ Multi-Family Residence containing _____ Units	_____ (above)(in) ground swimming pool
_____ Other Principal Building _____	_____ Storage shed(s)
_____ Other accessory Buildings: _____	

4. Indicate type of Foundation: ☐ Full Cellar ☐ Partial Cellar ☐ Slab ☐ Other

5. Indicate total number of the following:

_____ Toilets	_____ Bathtubs and/or showers
_____ Sinks	_____ Laundry Hookups
_____ Floor Drains	_____ Garbage Disposals
_____ Sump Pumps	

6. ☐ Attach a sketch showing building to be connected and placement of sewer lateral.
(Check when done)

7. My water is supplied by: ☐ Village ☐ Private Well

8. Check Type of Materials to be used: ☐ 6" Cast Iron (ASTM Spec A-74) with appropriate fittings
☐ 6" PVC Pipe [ASTM D-3034 (SDR-26/35)]

9. **APPLICANT'S SIGNATURE:** Application is hereby made to the Town of Duanesburg for approval and issuance of a Permit to connect the hereinabove described premises to the Town of Duanesburg Publicly Owned Treatment Works (POTW).

Applicant states, under penalty of perjury, that all statements made hereon and on any attachments hereto are true and complete to the best of applicant's knowledge.

Applicant agrees to comply with all applicable State and Local laws, ordinances, and regulations.

Applicant agrees to complete installation in accordance with Article 6 of the Sewer Use Law of the Town of Duanesburg.

Applicant agrees to call for all appropriate inspections as stated on the Permit.

Applicant acknowledges receipt of a copy of Article 6 of the Sewer Use Law of the Town of Duanesburg which sets for specifications for building and street laterals.

APPLICANT'S SIGNATURE: _____ DATE: _____

Note: Both No. 9 and No. 10 Must be signed.

10. **OWNER'S SIGNATURE:** The undersigned hereby represents that (s)he is an owner of the premises described in the foregoing application and consents to the issuance of a permit to the applicant named above for performance of the work described.

OWNER'S SIGNATURE: _____ DATE: _____

DO NOT WRITE BELOW THIS LINE

FOR OFFICIAL USE ONLY

The foregoing application is hereby: APPROVED: _____ Date: _____

DISAPPROVED (REFUSED): _____ Date: _____

for the following reason: _____

Special Conditions: _____