

# HINGHAM SEWER COMMISSION



## SEWER CONNECTION APPLICATION

Connection to the Municipal Sewer System shall be granted when a contractor licensed through this office properly fills out this application, insures that **ALL** fees are paid and any additional required approvals are satisfied. The drainlayer shall submit a sewer as-built, on attached sewer sketch form, within 10-days of completing the project or forfeit their right to perform future sewer construction until this requirement is met.

DIG SAFE NUMBER: \_\_\_\_\_ MAP & KEY: \_\_\_\_\_ ACCOUNT # \_\_\_\_\_

BOARD OF HEALTH ABANDONMENT PERMIT NUMBER: \_\_\_\_\_

### **NEW CONNECTION INFORMATION**

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

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

OWNERS ADDRESS (if different): \_\_\_\_\_

TELEPHONE NUMBER: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

CLASS: \_\_\_ **RESIDENTIAL** - # OF FAMILIES: \_\_\_ **COMMERCIAL** - DESCRIPTION: \_\_\_\_\_

### **DRAINLAYER INFORMATION**

LICENSED DRAINLAYER: \_\_\_\_\_

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

TELEPHONE NUMBER: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

LICENSED DRAINLAYER SIGNATURE: \_\_\_\_\_ DATE: \_\_\_/\_\_\_/\_\_\_

### **EXCAVATION INFORMATION**

**SIDEWALK:** \_\_\_ UNDISTURBED \_\_\_ REPAIRS MADE     **STREET:** \_\_\_ UNDISTURBED \_\_\_ REPAIRS MADE

### **CONNECTION CONFIRMED**

SEWER COMMISSION AUTHORIZATION: \_\_\_\_\_ DATE: \_\_\_/\_\_\_/\_\_\_