

**TOWN OF EAST LYME
APPLICATION FOR SEWER CONNECTION PERMIT**

OWNER: _____

MAILING ADDRESS: _____

PROPERTY ADDRESS: _____

Type of Use: **Residential** () **Commercial** () **Industrial** ()

This is a connection for **one** () **or more** () **buildings** () **demolition**

The undersigned agrees to abide by all provisions of laws, ordinances, and rules and regulations pertaining to East Lyme Sewers that are now in force or may be adopted in the future.

For Inspections, call (860) 739-6931, Ext. 150 at least 24 hours in advance.

SIGNED: _____ **(Owner)** **DATE:** _____

SEWER CONTRACTOR: _____ **LICENSE #** _____

PLUMBER: _____ **LICENSE #** _____

PERMIT NUMBER ISSUED: _____ **DATE:** _____

FEE RECEIVED: _____ **RECEIVED BY:** _____ **DATE:** _____

DRAWING OF PROPOSED CONNECTION SUBMITTED (use reverse side or separate sheet) _____

Contractor's Statement: I have thoroughly investigated the existing plumbing at this location and have disconnected and properly diverted all roof drains, yard drains, cellar drains, and cooling water, or other unauthorized connections to the sewer. I further certify that any necessary plumbing installation has been installed and does comply with the applicable codes of the Town of East Lyme and the State of Connecticut.

CONTRACTOR'S SIGNATURE: _____

PLUMBER'S SIGNATURE: _____

******DO NOT WRITE BELOW THIS LINE – FOR OFFICE USE ONLY******

INSPECTION RECORD:

HOOK-UP DATE: _____ **START USE DATE:** _____

SEPTIC TANK PUMPED & FILLED: _____

WATER METER READING: _____

FINAL INSPECTION AND ALL WORK APPROVED: _____

COMMENTS: _____

ACCOUNT NO. _____