

TOWN OF MEREDITH
SEWER DEPARTMENT
41 MAIN STREET
MEREDITH, NH 03253

SEWER SERVICE PERMIT

APPLICATION: Connection to Municipal Sewer System

Date: _____

Owner Name: _____ Commercial _____ Residential _____

Street: _____ Contractor _____

City/St/Zip: _____ Certificate of Insurance Yes__ No __

Property Street Location: _____

Tax Map & Lot # _____ Roadway Opening Permit: Yes ___ No ___

Applicant will adhere strictly to all rules, regulations and ordinances of the Meredith Sewer Department. Work done prior to permitting and/or inspection will result in double fees and may result in additional penalties as specified in the Sewer Ordinance.

Connection shall not be covered until inspected. Any connection that has been covered prior to inspection shall be uncovered at owner's expense.

Applicant Signature _____ Telephone _____

Fees: () \$ _____ Connection Fee Number of Units _____

() \$ _____ Access Fee

() \$ _____ Inspection Fee...\$25.00 for first hour and \$20.00/each additional hour.

\$ _____ Total Due

By: _____ Date: _____

Approved/Inspected By: _____ Date: _____

- Original - Administrative Services/Finance
- cc - Water Department
- Planning & Zoning
- Assessing