



Town of Farmington
Water and Sewer Department
(603) 755-4883

Sewer Service Connection Permit

OFFICE USE ONLY:
Issue Date: _____
 Cash Check # _____
Connection Fee \$3220
Amount \$ _____

Map # _____
Lot # _____
B/P # _____
Zoning _____

Location (Street # & Street Name): _____

Type of Occupancy: _____ Stories: _____ # of Apartments _____

Owner: _____ Mailing Address: _____

Email Address: _____

City: _____ State: ____ Zip: _____ Telephone: _____

Commercial only: estimated gallons of water usage per day _____

Name of Installer _____ Business Name: _____

Email Address: _____

Mailing Address: _____

City: _____ State: ____ Zip: _____ Cell #: _____

Date: _____

Signature of Owner or Installer

Plans and specifications for the proposed building are enclosed herewith. In consideration granting of this permit, the undersigned agrees:

1. To pay the current fee per equivalent dwelling unit.
2. To pay the current installation and inspection fee.
3. To accept and abide by all provisions of the Farmington Water Department Rules & regulations, and of all other pertinent ordinances or regulations that may be adopted in the future.
4. To maintain the water service at no expenses to the Town.
5. To notify the Water Department upon completion of installation and prior to backfilling.

Signature: Director of Water Department

Date