

**NEW MILFORD SEWER COMMISSION
WATER POLLUTION CONTROL AUTHORITY
123 WEST STREET - P O BOX 178 NEW MILFORD, CT 06776
PHONE 860-355-1049 FAX 860-350-4089**

APPLICATION FOR RESIDENTIAL SEWER CONNECTION / DISCHARGE PERMIT

Date _____ Expiration Date (180 DAYS) _____

Owners Name _____ Phone _____

Address _____

Property Location _____

Single Family

Number of Bedrooms _____ Total Rooms _____ Water Source _____ Water Acct.# _____

Multi Family

Unit counts 1BR _____ 2BR _____ 3BR _____ Water Source _____ Water Acct.# _____

CONNECTION FEE IS BASED ON THE MOST CURRENT FEE SCHEDULE.

DATE PAID _____ CK # _____ Non-Refundable Fee \$ _____

Administration fee of \$1850.00 of Which \$1500.00 is refundable upon receipt of an acceptable As-built

Date Paid _____ CK # _____ Non-Refundable Fee \$ 350

REQUIRED INFORMATION AND MATERIAL - CHECK ALL THAT APPLY.

- ZONING APPROVAL A-2 SURVEY OR PLOT PLAN DEED PUBLIC WORKS BOND
PERFORMANCE BOND DEEP PERMIT, IF APPLICABLE GREASE TRAP
SEWER PLAN CALL BEFORE YOU DIG STATE D.O.T PERMIT

NOTE: IF THE SOURCE OF WATER IS A WELL, WATER CONSUMPTION WILL BE ESTIMATED UNLESS A PROPERLY OPERATING WATER METER IS INSTALLED AND MAINTAINED BY THE PROPERTY OWNER.

NOTE: A PERMIT FROM THE HEALTH DEPARTMENT IS REQUIRED TO ABANDON A SEPTIC TANK.

NOTE: FOR CONNECTION FEES IN EXCESS OF \$10,000, REFER TO SECTION 5.2.1.C OF SEWER USE REGULATIONS.

OWNERS SIGNATURE _____ DATE _____

W.P.C.A. APPROVAL _____ DATE _____

DISCHARGE PERMIT

THIS PERMIT AUTHORIZES THE OWNER OF THE ABOVE PROPERTY TO DISCHARGE SANITARY WASTE INTO THE TOWN OF NEW MILFORD MUNICIPAL SANITARY SEWER SYSTEM.

NEW MILFORD WPCA BY _____ DATE _____

NOTICE: NO CERTIFICATE OF OCCUPANCY OR DISCHARGE PERMIT SHALL BE ISSUED OR BOND REFUNDED UNTIL AN ACCEPTABLE AS-BUILT PLAN IS SUBMITTED. IF THE AS-BUILT PLAN IS NOT SUBMITTED BEFORE THE EXPIRATION DATE OF THIS APPLICATION, THE PERFORMANCE BOND SHALL BE FORFEITED.

CALL BEFORE YOU DIG 1-800-922-4455