

**TOWN OF ROTTERDAM**  
**355-7575 EXT 395**  
**PERMIT APPLICATION FOR SEWER CONNECTION**

<b>TO BE COMPLETED BY APPLICANT</b>		<b>DATE:</b> _____
<b>OWNER INFORMATION</b> Names: _____ Address: _____ Phone: _____ Cell: _____	<b>CONTRACTOR INFORMATION</b> Names: _____ Address: _____ Phone: _____ Contractors Insurance Certificates: _____	
Property Location: _____ Property Address: _____ Proposed Lateral Size & Pipe Type _____ Residential _____ Commercial _____ Multiple Dwelling _____ Applicant (Sign) _____		
<b>TO BE COMPLETED BY TOWN OF ROTTERDAM</b>		
Fee: Sewer Connection Charge: _____ Inspection Charge: _____ Total: _____	Parcel Identification: _____ Road Cut Permit: _____ District No: _____ Approved: _____	

**ALL SEWER CONNECTIONS NEED TO BE INSPECTED / APPROVED BY THE TOWN PRIOR TO BACKFILLING. YOUR COOPERATION IS GREATLY APPRECIATED.**