

**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: _____  Contractor Insurance Certificates: _____ (must accompany application)	
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 for Sewer Connection Charge: _____  Inspection Fee: _____  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.**