

**EAST LYME WATER & SEWER COMMISSION
APPLICATION & CONTRACT FOR SEWER SERVICE**

1. Connection Checklist	Paid	Due	Amount Due
A. Permit Payment	()	()	_____
B. Assessment Payment	()	()	_____

All properties connected to public sewer will be charged a sewer assessment that will be levied against the subject property. Subdivided lots or land improvements beyond original assessment are subject to reassessment.

The Commission also requires a minimum \$5,000 surety bond naming the contractor OR East Lyme Water & Sewer (must include OR), a \$2,000,000 insurance policy naming the East Lyme Water & Sewer Commission as insured, and a copy of the contractor's license (P1 or P7). Depending on the nature of the work performed, the commission or its designees reserve the right to request a larger bond and insurance amount.

2. Property Information

A. Owner: _____
(if you are submitting this on behalf of the owner, please also provide an agent letter)

B. Tax Map & Lot Number: _____

C. Street Address: _____

D. Mailing Address (if different from above):

3. Type of Property

() Residential () Commercial () Industrial

This is a connection for one () or more () buildings

4. The undersigned agrees to abide by all provisions of laws, ordinances, rules, and regulations pertaining to East Lyme Sewers that are now in force or may be adopted in the future.

Date of Application: _____ Applicant's Phone Number: _____

Applicant's Signature: _____

Applicants Name (Print): _____

Contractor's Statement: I have thoroughly investigated the existing plumbing at this location and have disconnected and properly diverted all roof drains, yard drains, cellar drains, cooling water, and any other unauthorized connections to the sewer. I further certify that any necessary plumbing installation has been installed and complies with the applicable codes of the Town of East Lyme, the East Lyme Water & Sewer Commission, and the State of Connecticut.

Contractor's Name (Print): _____

Contractor's Signature: _____ License # _____

Plumber's Name (Print): _____

Plumber's Signature: _____ License # _____

For Inspections, call (860) 691-4116 at least 48 HOURS in advance.

FOR TOWN USE ONLY

OFFICE:

MCSJ Account #: _____

Online license verification check-off: _____

Accepted: East Lyme Water & Sewer Commission

By: _____, duly authorized.

Date of Acceptance: _____

FIELD:

Hook-Up Date: _____ Start Use Date: _____

Septic Tank Pumped & Filled: _____

Water Meter Reading: _____

Final Inspection and Work Approval Sign Off: _____

Comments: _____