

MILLCREEK TOWNSHIP SEWER AUTHORITY / REVENUE

**APPLICATION FOR PERMIT
TO MAKE, ALTER OR TERMINATE CONNECTION
TO THE SANITARY SEWER SYSTEM**

Permit Number: _____

Index Number: _____

The undersigned hereby applies for a permit to make, alter, modify or terminate a connection to the Millcreek Township public sanitary sewer system. A plan of the premises subject to this application and showing the proposed connection, alteration or termination and the proposed sewer facilities is attached hereto and is made a part of this application. The undersigned promises and agrees that if a permit is issued, the proposed work shall be done in accordance with regulations of the Millcreek Township Sewer Use Ordinances (No. 2004-4)(2004-15), rules and regulations governing the sanitary sewer system, construction standards of the Millcreek Township Sewer Authority and the terms of this application.

Permit Type: _____ Permit Fee: _____

Property Address: _____

Owner(s) Name: _____ and _____

Owner(s) Address: _____

Phone Number: _____

Subdivision _____ Lot Number: _____

Street(s) Involved: _____

Intended Use of Property After Connection: _____ Number of Units: _____

Contractor Name: _____ Phone: _____

Address: _____

Plumber Name: _____ Phone: _____

Address: _____

License Number: _____ Attached:

Address for Billing: _____

Financial Security Agreement: Date: _____

Not Required Due to:

A plan of the proposed property and work is attached to this application. This application must be signed by the property owner unless the owner(s) has/have submitted to the Millcreek Township Sewer Revenue Department a writing authorizing a third party to submit this application on the owner's behalf and agreeing to be bound by all obligations on the permit.

Date: _____

**APPLICATION FOR PERMIT
TO MAKE, ALTER OR TERMINATE CONNECTION
TO THE SANITARY SEWER SYSTEM**

Permit Number: _____

PLAN OF SUBJECT PROPERTY AND PROPOSED WORK: _____

(FOR SEWER USE ONLY)

Application GRANTED DENIED Date: _____

Contractor/Owner Financial Security on File? YES NO

Reason(s) for Denial: _____

Work Authorized: _____

This permit is valid for one year from the above date of approval and expires unless extended on request of the owner and for good cause shown.

Authority Representative: _____

(To be completed after connection and inspection)

Date of: Sewer Inspection _____ Drain Inspection _____

Connection Location: _____

Inspected Work APPROVED DISAPPROVED Reason(s) _____

Date: _____ Inspector Signature: _____