TOWN OF GROTON, MASSACHUSETTS FOUR CORNERS DISTRICT SEWER APPLICATION AND PERMIT

This application and permit is subject to the Groton Four Corners Sewer District Rules and Regulations as may be amended from time to time., The submittal of this application does not establish vested rights to available capacity. This permit expires 180 days from date of issuance.

The undersigned being the () property owner, () property owner's agent of the property located at

Nu	mber	Street	Parcel				
Red	Request a permit to install and connect a sewer to serve this () residence, () commercial building, () other						
Тур	be of Service () new () change of	use					
Property owner's name							
Pro	perty owner's mailing address						
Ple	ase provide the following informa	ation for each building space	e (if applicable, include existing and prop	oosed)			
1.	B. If office - square footage C. If restaurant – number of sea	its					
2.	Grease Trap Required? Size?						
3	Name and License Number of D	Drain Layer performing work	c				

License Number

4. Plans and specifications for the proposed building for sewer are attached hereto as "Exhibit A." In consideration of the granting of this permit, the undersigned agrees:

- A. To accept and abide by the provisions of the Town of Groton's "Regulation of Sewer Design, Construction, and Use" and of other pertinent ordinances or regulations.
- B. To maintain the sewer at no expense to the Town of Groton.
- C. Not to cover any portion of the work until inspected and approved by the Sewer Department or authorized agent. Note that inspection fees will apply.
- 5. Grinder Pumps (Please read and sign if applicable.)
 - A. The operation, maintenance, repair and replacement of low-pressure grinder pumps and appurtenances shall be the sole responsibility of the property owner. This also includes the force main and/or gravity sewer from the building drain to its connections to the main sewer
 - B. Owners of grinder pump systems may, if they choose to, obtain a maintenance agreement with a private service company certified by the pump manufacturer to provide routine and emergency on-call maintenance services.

Signed: _____ Date: _____

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- 6. The following fees should to be paid with the completed application:
 - A. Permit Application Fee (Residence \$150.00 or Commercial \$400.00)
 - B. Inspection Fee (minimum of \$50 may be subject to additional charges)
 - C. Connection Fee (to be determined by Sewer Commission)

(Please make check(s) payable to the "Town of Groton.")

INSTRUCTIONS FOR SEWER APPLICATION

- 1. Read all rules and specifications thoroughly.
- 2. Fill out the Application and return to the Sewer Department Office, 173 Main St., Groton, MA 01450.
- 3. Drainlayer, if needed, who will perform the work shall list name and license number in Item 2 of the Application.
- 4. Contractors or Owner must submit plans to the Groton Sewer Department (978 448-1117) prior to work.
- 5. Reasonable notice of completion of the installation and a request for FINAL INSPECTION shall be given to the Groton Sewer Department. NO SEWER LINE IS TO BE BACKFILLED UNTIL ALL WORK HAS BEEN INSPECTED BY THE SEWER DEPARTMENT OR AUTHORIZED AGENT.
- 6. All inspections will be made during normal workweeks: Monday-Friday between 8:30 A.M. and 3:00 P.M. unless otherwise prearranged. An inspection fee will be charged for all inspections. Inspections made outside normal working hours, for re-inspections required due to unacceptable or incomplete work or due to missed appointments by the applicant or applicant's agent will be subject to additional inspection fees. Charges will reflect the prevailing wage rates of the personnel making the inspection.
- 7. Requests for inspections on new sewer service connections shall be made by the licensed contractor 48 hours preceding the installation.
- 8. Plumbing Codes apply to interior plumbing and building drain(s) extending 10 feet from the inside foundation wall. Changes to interior plumbing and building drains(s) must be approved by the Plumbing Inspector. Approval of the sewer by the Sewer Commission shall not nullify this requirement.

For Office Use Only				
Property NoStreet	Address			
Billing Address:				
Permit Application Fee \$, *Inspection Fee \$	Connection Fee \$		
Total Amount Due: \$	Amount Received: \$	Method of Payment:		
APPROVED BY: Assistant to the Sewer Commission DATE:		he Sewer Commission DATE:	_	
CONNECTION INSPECTED E	PY:			
Name		Date of Inspection		
Title				
*May be subject to additional cl	narges			