



**APPLICATION FOR SANITARY SEWER SERVICE**

Colchester Sewer and Water Commission  
127 Norwich Avenue  
Colchester, Connecticut 06415  
860-537-7288 860-537-7273 (fax)

Date: \_\_\_\_\_

To the Colchester Sewer and Water Commission:

The undersigned hereby applies for connection of a sanitary sewer connection through a \_\_\_\_ in. service pipe within the premises on the (N, S, E,W) \_\_\_\_\_ side of \_\_\_\_\_ Street No. \_\_\_\_\_, owned by \_\_\_\_\_ with a phone number of \_\_\_\_\_ and an address of \_\_\_\_\_.

When sanitary sewer service is furnished in accordance with this application, the undersigned agrees to pay the rates established by the Colchester Sewer and Water Commission and to observe and be bound by its rules and regulations.

Signed: \_\_\_\_\_  
(Owner)

Permit to be issued to \_\_\_\_\_, the holder of Drain Layer's License No. \_\_\_\_\_, expiration date \_\_\_\_\_. The undersigned Drain Layer hereby agrees to all the terms and conditions set forth by the Colchester Sewer and Water Commission.

Signed: \_\_\_\_\_  
(Drain Layer)

Application Fee (\$70.00) \_\_\_\_\_ (Cash) \_\_\_\_\_ (Check No.) Date Paid \_\_\_\_\_

Permit No. \_\_\_\_\_

**AS BUILT PLAN REQUIRED**