

TUSCARAWAS COUNTY METROPOLITAN SEWER DISTRICT

Sanitary Sewer Connection Permit Application

Applicant (Owner) \_\_\_\_\_

Mailing Address (Street or P.O. Box) \_\_\_\_\_

City \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone Number (Home) \_\_\_\_\_ (Business) \_\_\_\_\_ (Mobile) \_\_\_\_\_

Contractor: \_\_\_\_\_

Mailing Address (Street or P.O. Box) \_\_\_\_\_

City \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone Number (Home) \_\_\_\_\_ (Business) \_\_\_\_\_ (Mobile) \_\_\_\_\_

Physical Address of Bldg Being Connected: \_\_\_\_\_

Village/Sub-division: \_\_\_\_\_

In submitting this application for a sanitary sewer service connection, the applicant agrees to abide by the Rules and Regulations of the Tuscarawas County Metropolitan Sewer District in force at the time of this application and as amended from time to time.

A non-refundable \$25.00 Application Processing Fee is due at the time the application is submitted:

Application Processing Fee Received:  Date Received: \_\_\_\_\_ By: \_\_\_\_\_

**For County Use Only**

Size of Applicant's Sanitary Sewer Lateral: \_\_\_\_\_ Permit Fee Calculation

Number of Equivalent Residential Units(ERU): \_\_\_\_\_ First ERU \_\_\_\_\_ Note 1 \_\_\_\_\_

Each Additional ERU \_\_\_\_\_ X Note 2 \_\_\_\_\_

Sub-Total \_\_\_\_\_

Processing Fee Credit -\$25.00

**TOTAL SANITARY SEWER CONNECTION PERMIT FEE** \_\_\_\_\_

Application for Service Approved By: \_\_\_\_\_ Date: \_\_\_\_\_

Title: \_\_\_\_\_

**Permit Fee Received:**  Date Received: \_\_\_\_\_ By: \_\_\_\_\_

Lateral location on County maintained sewer line \_\_\_\_\_

Lateral location at property Line \_\_\_\_\_

Lateral location at building \_\_\_\_\_

Date of Installation \_\_\_\_\_ Checked by: \_\_\_\_\_ **Attach Sketch**