

TOWN OF HANOVER

Application for New or Modified Non-Residential Sewer Service

Rev. 7/18

HIGHLIGHTED AREAS FOR OFFICIAL USE ONLY

Connection No. _____

Date _____

By _____

Owner _____
 Address _____
 Telephone Number _____
 Tax Map # _____ Tax Lot # _____

Received		
Inspection		
Tap Fee		
Inspection Fee		
Recapture Fee		
Total Fee		
Paid		
IDP required	<input type="checkbox"/> Yes	<input type="checkbox"/> No

(For single family or duplex services, file Residential application)
 Building Use: Residential Commercial Industrial
 Institutional Other

Wastewater Flows

Description	GPD	Units	Category	Number	Total
Flow from Flow Table, summed by Category:			A		
			B		
			C		
			Total		

Is there an Existing Service Connection? Yes No
Is Existing service connected to a manhole? Yes No N/A

Proposed or existing Service line:
 Size 4" 6" Other _____ (minimum commercial size for reuse is 6")
 Type PVC Cast Iron Ductile Iron Clay AC Other
All new services shall be PVC, Cast Iron or Ductile Iron

Service Line reuse Yes No
 Approved: _____ By _____

All existing services proposed to be reused shall be videoed and re-use must be approved by Town.

Sewer Service Connection Sketch (attach plans as necessary)

Signature This application will not be processed unless signed by the owner or authorized agent. By signing this application, the Owner agrees to allow the Town of Hanover personnel access to water meters at a mutually convenient time whenever possible. The Applicant shall be responsible for any damage to water meter wiring and register devices. The Owner agrees to conform to Town of Hanover Municipal Sewer Ordinance #14. Violations to Ordinance #14 may lead to immediate termination of service depending upon the severity or nature of the violation. The Town of Hanover will make a reasonable attempt to notify customers of potential loss in service due to planned system maintenance or in the event of system failures when possible. The Town does not guarantee prior notice of all interruptions of service.

Owner's Signature _____ Date _____ Owner's Authorized Applicant if Owner not Applicant _____

Applicant's contact information if different than owner:

Applicant's Name (Please Print) _____ Applicant's Address _____ Phone Number _____