

# SIMSBURY WATER POLLUTION CONTROL

## SEWER CONNECTION APPLICATION

Sewer work to be performed at:

(Street Address)

Owner's Name and Address

WORK TO BE PERFORMED:

Install Lateral  
Repair Lateral  
Install Main Line  
(Developers)


EXIT FROM BUILDING AS  
VIEWED FROM STREET

BACK  
LEFT  
RIGHT  
FRONT


OCCUPANCY OR USE:

Single Family  
Multi-Family  
Commercial  
Industrial


CBYD No. \_\_\_\_\_

CT State Road Permit No. \_\_\_\_\_

PIPE TO BE USED:

SDR 35  
SDR 45  
Ductile Iron  
Cast Iron  
Other


Company Name \_\_\_\_\_

Plumber's Name \_\_\_\_\_

Plumber's License \_\_\_\_\_

PIPE DIAMETER: \_\_\_\_\_ INCHES

Do you have a copy of Simsbury's General  
Requirements for Sewer Lateral Connections?

Y
N

APPURTENANCES:

Manhole  
Cleanout  
Check Valve  
Automatic Grease Recovery (ARGU)  
On-site Pump  
Other


Comments:

Special Conditions:

PLEASE FORWARD COMPLETED APPLICATION TO BOTH:

apiazza@simsbury-ct.gov

asturgeon@simsbury-ct.gov

ONCE YOUR APPLICATION HAS BEEN RECEIVED, PLEASE WAIT FOR AN EMAIL BACK FROM US WITH  
FURTHER INSTRUCTIONS REGARDING SIGNATURE / PAYMENT. THANK YOU!