

BUSINESS OFFICE

(860)668-3856

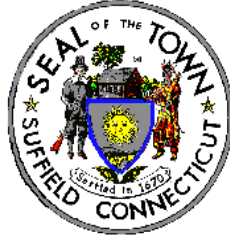
FAX: (860)668-3858

TOWN OF SUFFIELD
WATER POLLUTION CONTROL AUTHORITY

TREATMENT PLANT

(860)668-3853

FAX: (860)668-3858



844 East Street South
Suffield, Connecticut 06078-2402

CONNECTION REPAIR AND INSPECTION PERMIT # CRIP - _____

FEE: \$100

PART I – CHECK LIST:

EXCLUDING THE CHECK FOR PAYMENT, SUBMIT TWO (2) COPIES OF THE FOLLOWING DOCUMENTS INCLUDING THIS APPLICATION

_____ APPLICATION FEE

_____ APPLICATION

_____ PLANS & SPECIFICATION

_____ EXCAVATION PERMIT

PART II – APPLICANT NAME & ADDRESS:

TELEPHONE #: _____

CELL#: _____

EMAIL _____

PART II – BUSINESS/ RESIDENCE NAME & ADDRESS:

TELEPHONE #: _____

CELL#: _____

EMAIL _____

PART III – APPROVAL OF PLANS FOR REPAIR OF (check one):

_____ BUILDING CONNECTION FOR PROJECT WITH FLOWS LESS THAN 476 GPD

_____ BUILDING CONNECTION FOR PROJECT WITH FLOWS EQUAL OR GREATER THAN 476 GPD (EQUIVALENT OF 2 SINGLE FAMILY DWELLINGS).

PART IV – APPROVALS AND PERMITS HAVE BEEN OBTAINED FROM:

(Submit evidence of approvals/permits)

- _____ WPCA PLANNING
- _____ TOWN PLANNING & ZONING BOARDS/COMMISSIONS
- _____ DEEP (if applicable)
- _____ CONSERVATION COMMISSION

PART V – WASTEWATER FLOWS

Average Daily Flow Currently: _____ GPD
 Peak Daily Flow Currently: _____ GPD
 Ultimate Average Daily Flow: _____ GPD
 Ultimate Peak Daily Flow: _____ GPD

OFFICIAL USE ONLY

PERMIT ISSUED: ____ YES ____ NO REVIEWED BY: _____
 DATE: _____

SIGNATURE

PART VI – WASTEWATER CHARACTERISTICS

Describe wastewater characteristics of effluent being discharged into sewer system, if other than residential sanitary wastewater (Attach additional sheets if necessary).

Pollutant	Concentration (mg/l)
_____	_____
_____	_____
_____	_____

PART VII – SEWER SYSTEM

Exiting Pipe Size & Material: _____
 Describe Problem and Location: _____

 Describe Repair: _____

PART VII – LOW PRESSURE SEWER SYSTEM

A GRINDER PUMP SYSTEM HAS BEEN APPROVED BY THE WPCA FOR THE RESIDENCE AT:

_____, **SUFFIELD, CT.**

The following conditions have been met or exceeded

- 1) System design reviewed and approved by WPCA or representative for capacity, pipe size, isolation requirements, home owner education, compliant with policy?
- 2) Emergency Power connected or connection available? Type: _____
- 3) System inspected by local plumbing inspector/drain layer installed
- 4) Maintenance and repair procedures posted and reviewed by home owner

Initial: _____

PART VIII – SIGNATURES (ENGINEER’S SIGNATURE REQUIRED IF FLOW ≥ 476 GPD)

APPLICANT SIGNATURE: _____

WPCA SUPERINTENDENT: _____

This is to certify that I have personally reviewed all engineering information contained in the application and supportive documents, drawings, plans, and specifications which are part of this application and that I have found it to be good engineering quality, true and correct, and in conformance with the requirements of the Town of Suffield, Water Pollution Control Authority, and it does not, to the best of my knowledge, withhold information that is pertinent to a determination of compliance with the requirements of the WPCA.

Name of Design Engineer: _____

Design Firm: _____

Mailing _____

Address: _____

Telephone No.: _____

SEAL

SIGNATURE