

**WATER POLLUTION CONTROL AUTHORITY
TOWN OF PUTNAM**

APPLICATION FOR WATER/SEWER CONNECTION

ACCOUNT NUMBER: _____

HEADER NUMBER: _____

TO CONNECT TO: SANITARY SEWER

WATER SUPPLY

DATE: _____

Owner's Name _____

Owner's Signature _____

Mailing Address _____

City _____

State _____

Zip Code _____

Service Address _____

Map and Lot No. _____

Volume and Page _____

Phone Number _____

Estimated Sewerage Flow/Water Usage (110 gals./bedroom/day) _____

No. of Bedrooms _____

Description (new home, addition, etc.) _____

Approval is hereby given to _____

for connection into sewer/water as follows:

Location _____

Special Provisions _____

This Authority, however, is given and accepted by the permittee upon these express conditions: Approval is in force for one year from the date connection fee is paid. Owner has 15 days from approval date to make payments to the Town of Putnam – WPCA Collector's Office for sewerage and/or water. Permittee to obtain a Road Permit with Department of Public Works. A building permit will not be issued until all connection fees are paid in full.

_____ Date

_____ WPCA – Director Approval

Sewer Fee: _____

Date Paid _____

Water Fee: _____

Date Paid _____