TOWN OF COLCHESTER \prec WASTEWATER ALLOCATION AND SEWER CONNECTION PERMIT \succ

	PERMIT #
	Application date: ✓ Please check one: □ Request for new Town allocation □ Request for transferred allocation ✓ Please check one: □ Residential □ Commercial □ Industrial □ Institutional (Complete sections 1-4. Skip section 2 for residential properties. Complete section 5 for transfers.)
Section 1	Tax Map and Parcel numbers for all lots to which allocations shall be assigned: Location/Address of building to be connected to municipal sewer: Billing information for wastewater charges: Contact person: Mailing Address:
Saction)	Business Name: Phone No: Mailing address: Describe the nature of your business and possible wastes to be discharged other than domestic wastewater:
Saction ?	Existing allocation (gallons): Additional allocation requested (gallons): New total allocation (gallons): Anticipated date of connection:
Section	Owner of lot(s) to which allocation shall be assigned: Phone No: Mailing address: > By signing in the space provided below, the legal owner of said lot(s) accepts sole responsibility for all debt obligations. The owner also, certifies that the information provided is true and correct to the best of his/her knowledge and he/she shall observe the rules and regulations of the Town of Colchester in making and maintaining the requested connection. > Name of Owner: (please print) Email:
	Signature of Owner: Date:
Section 5	 Tax map and parcel number for all lots from which allocation shall be transferred:
	 Name of Owner: (please print) Signature of Owner: Date:
	FOR OFFICE USE ONLY
	Date: Application Approved: Application Not Approved: Comments:
	Signed: Connection Fee Paid: □