



SEWER CONNECTION APPLICATION & PERMIT

Job Address _____	Permit # _____
Assessor's Map #: _____	W/S Account # _____
Sequence # _____	Tax Lot # _____
	Bldg. Permit # _____

Applicant's Name _____	Phone #: _____
Mailing Address _____	
Street/PO Box	City
State	Zip
Contractor's Name _____	Phone # _____
Contractor's CCB #: _____	Expiration Date _____

I hereby apply to the City of Veneta for permission to install a sanitary sewer service connection for the property listed above. I agree to comply with all City of Veneta regulations governing the installation and operation of sanitary sewer lines. I also agree that no work shall begin until approval has been granted by the City and as-built drawings of the installation have been submitted and approved.

 Applicant's Signature Date

Approved: Tap & Cut into sewer as shown. _____ Approved: Connect to stub as shown. _____ Approved: Re-connect to previous connection as shown. _____ Denied: For reasons specified below. _____	<p>FEES</p> Hook-Up Charge: _____ System Dev. Charge: _____ Date Paid: _____ Receipt #: _____
_____ City of Veneta Public Works Superintendent Date	