

Water Connection Permit Town of Plaistow, NH

145 Main St Plaistow, NH 03865 603-382-5200

Permit # :	
Issue Date: _	
Man #	Lot #·

(Office Use Only)

Pursuant to the provisions of the Town of Plaistow Water Ordinances, anyone wishing to modify, replace, or connect to any part of the Town's utility system use for conveyance of water with the Town of Plaistow cannot do so without satisfying the conditions outlined herein and obtaining a Water Connection Permit issued by the Plaistow Water Department. Applications are accepted and dated as such only when fully complete with all required attachments and information. An incomplete package will be returned without review. Utility connections are permitted only after all applicable plans have been reviewed and approved, all fees are paid in full, and issues of a Permit to Proceed from the Plaistow Water Department. Approval may be granted only upon submittal of all applicable documents, approved record drawings, and satisfaction of warranty period. This permit application is automatically determined null and void if all conditions are not met within one year of permit to connect. The Town reserves the right to terminate utility service if any condition described herein or in the Plaistow Town Code are violated.

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Site Address:		
Property Owner:		
Mailing Address:		
City:	State:	Zip Code:
Phone: Email:		
Applicant (if different from owner) :		
Applicant's Business Name:		
Mailing Address:		
City:		Zip Code:
Phone: Email:		
Contractor Business Name:		
Licensee: Lic	cense #: Expirati	on Date:
		on Date:
Licensee:		
Mailing Address:	State:	Zip Code:
Mailing Address:	State:	Zip Code:
Mailing Address: City: Email:	State:	Zip Code:
Mailing Address: City: Phone: Email: Check all that apply for this property: New Construction	State:	Zip Code:
Mailing Address: City: Phone: Email: Check all that apply for this property: New Construction Single-Family Dwelling	State: Multi-Family Dwelling	Zip Code:
Mailing Address: City: Phone: Email: Check all that apply for this property: New Construction	State: Multi-Family Dwelling Fire Suppression System	Zip Code:
Mailing Address: City: Phone: Email: Check all that apply for this property: New Construction	State: Multi-Family Dwelling Fire Suppression System	Zip Code:

	WATER CO	NNECTION				
FOR RESIDENTIAL		FOR COMMERCIAL				
Size of Water Line:		Size of Water Line:				
Backflow Device* Require	ed? YES	Backflow Device* Rec	quired?	YES		
Permit must be entirely completed, and the application fee must be paid in full before this permit will be reviewed or approved. No permit will be issued until all connection fees are paid. Water connection work shall not begin until the permit is approved and issued.						
This application to connect to the Town of Plaistow Water System is made by the undersigned who agrees, as the authorized representative or owner and future owners, to indemnify the Town from any loss or damage that may directly or indirectly be occasioned by said connection to the system. The Town of Plaistow in no case, assumes any responsibility or liability by reason of granting this permit. The applicant also understands and agrees that with the approval of this permit, and the completion of connection, a water account will be created or adjusted in accordance with the request of the permit. If the information provided by the applicant is incorrect, the applicant understands and agrees that there could be additional fees based on the fees outlined in the Town of Plaistow Water Ordinance. The undersigned further acknowledges that he/she is familiar with and agrees to abide by the Town of Plaistow Water Ordinance. By signing the PROPERTY OWNER acknowledges that they are responsible if the tenant(s) at the noted address does not pay for their services.						
Applicant Signature		DATE				
Property Owner PRINT NAME (if different from applicant) Return completed permit application to Plaistow Water Dept/145 Main St, Plaistow, NH 03865						
Property Owner SIGNATURE		DATE				
Approved by: Date:			Department to schedule connection after approval			
Please refer to the To	own of Plaistow Water Ordinano		usage an	d other fees		
	<u>OFFICE</u>	USE ONLY				
Size of Line						
Meter Number:						
Commercial/Industrial		Fee:				
Paid By:	Date Paid:	Check Number:		Rec'd by:		
Account Number	Inspection Date:	Inspected By:		Date of Tap:		
Notes:						