

APPLICATION FOR SEWER CONNECTION PERMIT

CORPORATION OF THE MUNICIPALITY OF STRATHROY-CARADOC
52 FRANK STREET, STRATHROY, ON N7G 2R4
PHONE: 519-245-1105, EXT. 236 OR 234
MATTHEW STEPHENSON, CHIEF BUILDING OFFICIAL

For office use	
DATE RECEIVED	PERMIT NUMBER

PROJECT INFORMATION

Municipal Address	
Postal Code	Municipality

APPLICANT / INSTALLER INFORMATION

Name	Address
Telephone Number	Fax/Email:
New Connection [] Repair []	Connected to Water Y [] or N []
Date to be Connected	

OWNER INFORMATION (if different from applicant)

Name	Address
Telephone Number	Fax/Email:

I, _____, hereby make application for a Sewer Connection Permit and have made the necessary arrangements and fee payments with the Municipality's Water Department to connect to the Municipal Water System and disconnect the non-municipal water system prior to the final approval of the new sewer connection.

Applicant Signature Date

This application requires the approval of the Strathroy-Caradoc Water Department located at the Entegrus Office at 351 Frances Street, Strathroy prior to submission to the Building Department.

Strathroy-Caradoc Water Department Date