

Permit Number

APPLICATION FOR SEWER SERVICE CONNECTION

TO: Board of Sewer Commissioners
41 Highland Avenue
Cohasset, MA 02025

(To be completed by Homeowner)

APPLICANT: Name _____ (Must be Owner)

Mailing Address _____

Phone number _____

PROPERTY ADDRESS: _____

Is this a Condo or Rental unit? Please specify: _____

Map _____ **Lot** _____

APPLICATION FEE (NOTE: ONE CONNECTION PER APPLICATION):

\$1000.00 - per residential sewer service

(Note: Betterments will be based upon Equivalent Dwelling Units (EDU's) serviced.)

Amount Enclosed: _____ Check # _____ Date _____

EXISTING WATER USE: _____ hundred cubic feet/year (add four quarters)

(Records can be obtained from the Cohasset Water Department. Attach copy of billing and use information.) (Municipal Sewer Charges are based upon water meter readings.)

Number of bedrooms: _____ Number of persons: _____

Number of separate dwelling units to be serviced: _____

Do you have a garbage grinder? _____

Do you have a sump pump? _____

Are you within the 100 foot buffer zone of a wetland resource area? _____

Are you within the 50 foot buffer zone of a wetland resource area? _____

(To be completed by Drain Layer.)

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CSC Licensed Drain Layer to be utilized for connection:

Name/Company: _____

Address: _____

Phone Number: _____ Fax Number: _____

License Number: _____ Expiration Date: _____

Proposed Installation (Attach service plan to application.)

(Describe work in narrative form: pipe: type, size and material; any proposed adapter fittings, pipe slope, manholes, etc...):

List E/One Equipment/Unit to be ordered by Owner:

QUANTITY DESCRIPTION OF EQUIPMENT OR MATERIALS

QUANTITY	DESCRIPTION OF EQUIPMENT OR MATERIALS

Will the pump be located in a flood prone area? _____

Have you completed E/One Installation Training? _____ Date Completed _____

Will the water service also be replaced during construction? _____

Will a second water meter be installed for outdoor water uses? _____

Will the septic tank be re-utilized after pumping and sanitizing? _____

If yes, for what use? Pump Chamber Emergency Wastewater Storage
 Irrigation Water Storage Other _____

Drain Layer Signature: _____ Date: _____

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Proposed Sketch of Connection
(To Be Attached by Drain Layer)

The Licensed Drain Layer must layout the location of the proposed sewer service in consultation with the applicant. The following is a check list of items which must be depicted on the Sketch of the Connection or Service Plan and then checked off as completed. Provide an explanation below of any items not checked or included

- Existing septic tank, leach field and other on-site wastewater disposal facilities
- All wastewater pipes exiting the building
- Existing Utilities Existing Septic System Irrigation/sprinklers
 - Water Gas Telephone Electric Cable/Internet
 - Existing Drains Exist. sub-surface structures (cisterns, drywells,...)
- Proposed E/One Pump location Proposed E/One Control Panel location
- Proposed E/One vent pipe location Proposed E/One check valve location
- Proposed gravity piping slope, length and proposed inverts
- Site amenities restricting access, fences, walls, structures,...etc.
- Ledge outcrops (Refer to Zoning regulations for additional ledge restriction.)

- Attach supportive documentation and calculations as needed.
- Attach building or plumbing plans, if being remodeled or interior plumbing revisions.

The undersigned agrees to submit an as-built plan of the completed installation within fourteen (14) days of construction completion with ties, offsets and depths clearly depicted. "Final Certification and Authorization to Discharge" will not be issued until the As-Built Plan has been accepted by the Town. The undersigned agrees to abide by all Project-wide NOI Order of Conditions criteria established for this project.

Drain Layer Signature: _____ **Date:** _____

The undersigned attests to the above and acknowledges and agrees to the following:

- 1) No work shall commence until the Sewer Commissioners has issued a Permit for the Sewer Service Connection and all required inspections will be coordinated with the Town prior to backfilling trench, pipe and pump chamber. Inspections shall be scheduled with Commission’s office at least 48 hours prior.
- 2) The Owner shall facilitate through its installer and prior to any extension or connection to the Municipal Sewer Service Stub, the water jetting and/or snaking of the Municipal Sewer Service Stub all the way to the main line as needed to clear any sediment, debris or grease which could have accumulated over time.
- 3) The Owner shall schedule and facilitate the execution of an interior and exterior inspection by the Sewer Commission’s inspector and/or other Town agents of all water resource protection measures, all proposed gravity and pressure piping, the final connection to the stub, the pump chamber installation, the redundant check valve installation, the septic system de-commissioning, the basement inspection for plumbing connections all prior to any backfilling of the related excavation and prior to commencing any discharge to the system. The Owner further agrees to schedule the pressure testing and pump start-up services for the installation. The Owner agrees to allow all access to the Town and its agent for purposes of inspection and testing and will hold the Town harmless for any damage or injury incurred as a result of such activities. Please note: Inspection scheduling must be done at least 48 hours prior to actual need.
- 4) The Owner, through this application, shall provide pressure testing of the new installation, by the Town. If the service piping or appurtenances fail the pressure test, the owner’s contractor shall repair the system and any additional costs for re-testing will be paid directly to the Town by the owner to facilitate retesting of the system. Such fee shall be paid for each re-test required until it passes the pressure test. All contractor costs for leak detection, materials, repairs and replacement of failed components and the set-up and scheduling of test will be borne by the Owner.
- 5) The Sewer Commission shall provide a copy of this form to the Board of Health and the Conservation Commission for their use and tracking. The owner shall comply with all Board of Health requirements relative to septic system decommissioning and shall comply with all other applicable local, State and Federal regulations governing the installation and related construction activity including OSHA and state trench safety regulations.
- 6) The Owner shall ensure and maintain that only domestic wastewater enters the sewer system and that no drainage water, sump pump discharges, roof drainage or other extraneous flows enter the system. The Owner further agrees to maintain their gravity piping and pump unit so as not to leak or allow groundwater or surface water from entering the pump chamber.
- 7) The Owner agrees to accept and fully comply with all conditions of the Project-Wide Notice of Intent Order of Conditions issued by the Conservation Commission on 10/06/09, DEP File # SE-13-0981, for sewer service work governed by this project and any site specific controls ordered by their agent after site inspection and review of the specific proposed sewer route. The Owner acknowledges that they have reviewed and understand the Order of Conditions provided in their “Resident Packages” and also agree to abide by all conditions and all subsequent Site specific controls issued by the Conservation Commission Agent in compliance with said Order of Conditions, including the posting of a project sign at the site.
- 8) We, the undersigned Owners of the above referenced property, may have chosen alternate or nonstandard methods of construction or materials as listed below which may or may not expose our property or possessions to increased risk of loss in order to reduce our private construction costs of our sewer service installation. By making a free and independent election to use such methods and/or to connect to the Town’s Low Pressure Sewer System, by submission of this Application, we here-in release the Town, its employees and its agents from liability now and in the future if such methods and/or connection whether properly or improperly applied, should result in any loss, damage, injury or other liability resulting from this election. We further agree to indemnify against any such loss resulting from this election and/or use.
 - Use of Pre-insulated Piping to reduce burial depth of service. Use of an Indoor Grinder Pump.
 - Use of an Alternate Grinder Pump. (Manufacturer) _____ Model _____
 - Re-use of an existing septic tank for alternate purposes. (Use) _____
 - Other non-standard construction method (stipulate): _____

Owner/Applicant (Signature): _____ **Date:** _____

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For Board of Sewer Commissioners Use

Application Complete ____ Yes ____ No

Engineer's Recommendation: Reviewer Name: _____ Date: _____

____ Approved ____ Not Approved ____ Approved as Noted

Permit Number: _____ Date Permit Issued: _____

Comments: _____

Conservation Commission Site Specific Review (attached) (Ref. # _____)

Sewer Commission Site Specific Review (attached) (Ref. # _____)

Pump Order Placed _____ Date _____ Voucher # _____

Total Direct Assessment Paid (Pump Pre-payment): _____

Pump Order Filled (date) _____ Owner call placed (date) _____

Start-Up Complete (date) _____ As-Built Plan Submitted (date) _____

Town of Cohasset Conservation Commission Agent
Certificate of Compliance Site Specific Sign-off

Signed _____ Date _____

Town of Cohasset Board of Health Agent or Construction Representative
Certificate of System Decommissioning Site Sign-off

Signed _____ Date _____

FINAL CERTIFICATION AND AUTHORIZATION TO DISCHARGE

ISSUER (Signature) _____ Date _____

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Intentionally left blank for attachment of site plans and support data (Staple at top)

