

McKEAN TOWNSHIP SEWER CONNECTION APPLICATION/PERMIT

Property Index No.: _____

Permit No.: _____

Property Owner(s) Full Name(s): _____

Property Address: _____

Mailing Address: _____

Phone No.: _____

No. of EDU's (to be determined by Authority): _____

Size of Pipe if other than 4": _____

Intended Use: Residential: _____

Non Residential: _____

Lot Description: _____

Street Connection Name: _____

Plumber/Sewer Contractor Name: _____

Plumber/Sewer Contractor Address: _____

Plumber/Sewer Contractor Phone No. _____

Connection Starting Date: _____

In consideration of furnishing me/us with new sewer service as above applied for, I/we agree to be bound by, and obey, the Rules and Regulations for Connection to the Sanitary Sewer System and the Mandatory Connection Ordinance. I/we agree that the issuance of this Permit and my/our right to connect to the sewer system is conditioned upon my/our compliance with the Rules and Regulations of the Authority and the Rules and Regulations for connection to the Sanitary Sewer System. I, the undersigned, hereby certify that all information and statements made by me or on my behalf of this Sewer Connection Permit are true and correct to the best of my information, knowledge and belief, and that the same are hereby made subject to the penalties of the Pennsylvania Crimes Code at 18 Pa.C.S.A. Section 4904 relating to unsworn falsification to authorities.

Date: _____

Signature(s): _____

Please make checks payable to the McKean Township Sewer Fund

- **Contact the McKean Township Sewage Treatment Plant Operator for lateral location.**
- **Sewer must be inspected before backfilling occurs.**
- **Contact the McKean Township Sewage Treatment Plant Operator Office at 474-4644 to schedule an inspection at least twenty-four hours in advance during normal working hours. Inspections will be conducted during normal working hours.**

OFFICE USE ONLY

Permit Fee: Date Paid _____
Amount Paid _____

Signature _____

Financial Security Amount _____

Date Received _____

Approved _____

Rejected _____

Inspected By: _____

Date Inspected: _____

Notes _____

