## TOWN OF WESTWOOD DEPARTMENT OF PUBLIC WORKS

50 Carby Street Westwood, MA 02090 Phone: 781-326-8661

Fax: 781-320-1070



Permit Number	
Date Issued	
Expiration Date:	

## **Application For**

Permit new sewer connection  Town of Westwood: General bylaws of the 7	Γown Article 11 (as ame	nded)			
Permit addition (no inspection) Pursuant to G.L.c.82A §1 and 520 CMR 7.00	0 et seq. (as amended)				
Permit cut & cap at Main					
Permit cut & cap TEMP					
THIS PERMIT MUST BE FULLY COM	MPLETED PRIOR TO C	ONSIDERATI	ION		
Location(s) of Excavation:					
Street Address:					
Name of Applicant:	Phone:	Cell:			
	E-mail Address:				
Street Address:	City/Town	State	Zip		
Name of Excavating Contractor:	Phone:	Cell:			
	E-mail Address:				
	Z man ridaress.				
	GU T	La	T ex		
Street Address:	City/Town	State	Zin		

Name of Equipment Operator:			
Street Address:	City/Town	State	Zip
Name of Owners (s) of Property:	Phone:	Cell:	
	E-mail Address:		
	E-man Address:		
Street Address:	City/Town	State	Zip
Silver radioss.	City/ Town	State	Zip
Description, location of proposed sewer line:		•	· · · · · · · · · · · · · · · · · · ·
Please describe the exact location of the proposed sewer			
Street address:			
Description is as follows: Starting Point:	Finish I	Point:	
Does this property have an existing sewer connect	ion		
Existing house with no prior sewer connection			
☐ New construction of house			
☐ Renovation or Addition to existing house			
Number of bedrooms:			
Number of condo units: # of bedrooms:	Number of condo units: # of bedrooms:		
Number of apartments: # of bedrooms:	<del></del>		
What is the source of water to the premise?			
☐ Municipality ☐ Well			
Anticipated Start Time: Date:			
Anticipated End Time: Date:			
APPLICATION/INSPECTION FEE	APPLICATION/INSPECTION FEE \$		
SYSTEM CONNECTION FEE \$			
ADDITION (No Increasion) FFF #			
ADDITION (No Inspection) FEE \$			
TOTAL \$			
101/12 ψ			
Dig Safe #	Date # Received		

## **CONDITIONS**

- 1. Contractor/Property Owner agrees to conform to statutes, bylaws and/or other specifications, rules and regulations of any of the Town of Westwood, Massachusetts Water Resources Authority, and the Massachusetts Department of Environmental Protection.
- 2. If applicable, the provisions of Chapter 602 of the Acts of 1962, which provides that the Town of Westwood may construct the particular sewer and assess the total cost on the land benefited thereby.
- 3. All sewer work needs to be inspected by the Sewer Department. A (24) Hour advance notice is required to schedule such inspection.
- 4. Application shall be accompanied by three(3) sets of plans showing structure, size of service, pipe material, direction of flow, elevation of pipes and proposed ground elevations; elevation of connection to existing sewer line, invert elevations and identification of nearest existing manholes both sides of connection, and slope of existing pipe. For new construction, this plan shall be by a Massachusetts Registered Professional Engineer. Scale shall be 1" = 20' or 1" = 40'. Plan size shall be no larger than 11" x 17". Two sheets may be used if necessary.
- 5. The contractor/property owner doing the work shall furnish(1) hard copy of an "As-Built" of the exterior sewer connection, showing length of pipe, location of bends along pipe, degree of bend; location, ties, and depth. Location of pipe at foundation and ties to all clean outs. Scale shall be 1" = 20' or 1" = 40'. Plan size shall be no larger than 11" x 17". Two sheets may be used if necessary. All plans shall be by a Massachusetts Registered Professional Engineer. Submitted within one week of completion of work.
- 6. A copy of the Permit shall be available on-site at all times.

I have read all of the necessary requirements and agree to conspecifications, rules, and regulations of the Town of Westwo	· · · · · · · · · · · · · · · · · · ·
Applicant Signature	Date
Excavator Signature (If Different)	Date
Owner Signature (If Different)	 Date

## PERMIT IS VALID SIX MONTHS FROM DATE OF ISSUE

FOR TOWN OF WESTWOOD USE – Do not write in this section		
PERMIT APPROVED BY	APPLICATION FEE \$	
PERMITTING AURTHORITY	DATE	
CONDITIONS OF APPROVAL		