



COST: \$ 60

DATE PAID: _____

CHECK#: _____

**TOWN OF TEWKSBURY
SEWER APPLICATION**

(978) 640-4370
(978) 640-4365 (FAX)

Sewer Permit Number: _____

Map/Lot: _____

To the Town of Tewksbury, Massachusetts:

The undersigned, being the _____ of the property at _____,
(Owner's Name) (Number and Street)

does hereby request to install and connect a building sewer to serve the _____ at said
location. (Residence, building, etc.)

1. The following indicated fixtures will be connected to the proposed building sewer:

<u>Number</u>	<u>Fixtures</u>	<u>Number</u>	<u>Fixtures</u>
_____	Kitchen Sinks	_____	Water Closets (Toilets)
_____	Lavatories (Bathroom Sink)	_____	Bath Tubs
_____	Washing Machines	_____	Showers
_____	Dish Washers	_____	Garbage Disposals

Specify other fixtures _____

2. The number of persons who will use the above fixtures is _____
3. The name and address of the approved drain layer who will perform the proposed work

4. Plans and specifications for the proposed building sewer are attached hereto
5. Notification of Water Department to layout water service from water main to curb box (from curb box to the building it is the drainlayers responsibility not the Town of Tewksbury).

In consideration for granting this permit, the undersigned agrees:

- A. To accept and abide by all provisions of the Rules and Regulations governing the use of sewers of the Town of Tewksbury, and of all other pertinent rules and regulations that may be adopted in the future.
- B. To pay all the cost of said building sewer and its connection to the public sewer in said street, including all labor and materials or other expense incurred necessary for the proper construction of said building sewer as determined by the Town.
- C. To maintain the building sewer at no expense to the Town.
- D. The applicant and owners(s) and applicant and owner(s) successors, that the Town shall have access at all reasonable hours, to said premises, to see that all laws, by-laws, ordinances, rules and regulations relating to the sewer are complied with.
- E. To notify the Town when the building sewer is ready for inspection and connection to the public sewer, but not before any portion of the work is covered.
- F. To accept and abide by all provisions of Title V governing the abandonment of septic systems, which includes the determination of the location and abandonment of all septic tanks, pits etc. located at this property.
- G. That construction of the sewer connection will be completed within 60 days of issuance of this permit.

Approved: _____ Date: _____
(Plumbing Inspector)

Approved: _____ Date: _____
(Water Department)

Approved: _____ Date: _____
(Conservation Commission)

Approved: _____ Date: _____
(Health Department)

Street Opening Permit needed? (check one): Y____ N____ if so, permit #: _____

Dig Safe #: _____ Trench Permit #: _____

Sewer Plug Removal: _____ Date: _____
(Town Official)

Work Started: _____ Work Finished: _____

Town Inspector: _____ Date: _____

I hereby certify that the service connection for the property appearing on the first page of this application was built in conformance with the Rules and Regulations governing the use of the public sewer of the Town of Tewksbury and is accurately depicted on the attached as-built drawing. Additionally, I hereby attest under pains and penalties of perjury that I have caused the septic system(s) serving the property appearing on the first page of this application to be abandoned in accordance with the requirements of 310 CMR 15.000, State Environmental Code, Title V. This includes the pumping of all structures (tanks, pits, etc.) by a licensed Septage Hauler, the rupturing of all structures (tanks, pits, etc.) and the filling of all voids.

I have reviewed Health Department files and have abandoned (# of tanks, pits, etc.)____tanks, cesspools, pits, etc.

Signed: _____ Date: _____
(Drain Layer)

Septic System Abandoned: _____ Date: _____
(Town Inspector)

Final Approval: _____ Date: _____
(Town Engineer or Designee)

FORM 4 – SYSTEM PUMPING RECORD

**Commonwealth of Massachusetts
Tewksbury, Massachusetts**

SYSTEM PUMPING RECORD

System Owner	System Location

Date of Pumping: _____

Quantity Pumped: _____

Cesspool? No Yes

Septic Tank?: No Yes

Condition of System: _____

System Pumped By: _____

License No.: _____

Contents Transferred To: _____

Date: _____

Inspector: _____