



TOWN OF TIVERTON, RHODE ISLAND
WASTEWATER MANAGEMENT COMMISSION

343 Highland Road, Tiverton RI 02878
 Phone: (401) 625-6701 Fax: (401) 625-6783

SEWER CONNECTION APPLICATION

PROPERTY ADDRESS

OWNER'S INFORMATION

NAME _____ MAILING ADDRESS _____
 PHONE NUMBER _____ CITY STATE ZIP _____

() FUNDS FROM THE SEWER
 TIE-IN LOAN FUND WILL BE
 USED TO PAY SEWER
 APPLICATION FEE.

PROJECT INFORMATION

Type of Project () Residential () Commercial () Industrial
 Water Source () CITY WATER () WELL
 WATER SUPPLIER _____ ACCOUNT # _____

PROPOSED CONTRACTOR (to be completed before issuance of connection permit)

Contact: _____ Company Name: _____
 Telephone Number: _____ Address: _____

RI DIG SAFE - 1-800-225-4977

Wastewater Management (401) 625-6701
 DPW Director (401) 625-6760

NOTES:

- 1 Call 625-6701 to schedule an inspection of service installation at least 48 hours in advance of the start date.
- 2 DPW Director's written approval of any road patch & and approved AS-BUILT drawing must be submitted before Sewer Use Permit will be issued.

I (We) hereby agree to be bound by the provisions of the Tiverton Sewer Use Ordinance and to such special conditions, restrictions, and regulations as may be imposed by the Wastewater Management Commission. Any and all State & Federal regulations, & all Tiverton DPW rules and Regs.

SIGNATURE OF OWNER _____ DATE: _____
 SIGNATURE OF APPLICANT _____ DATE: _____

FOR OFFICIAL USE ONLY

ASSESSORS
 MAP _____ BLOCK _____ CARD _____

Residential
 Number of bedrooms per Tax Card _____
 Estimated Flow _____ gpd
 (___ # of bedrooms x 110 gallons per day)

Commercial/Industrial
 Type of establishment _____

Usage Type*	per Unit	# of Units	Total Flow
1.) _____	_____	x _____	= _____ GPD
2.) _____	_____	x _____	= _____ GPD
3.) _____	_____	x _____	= _____ GPD
4.) _____	_____	x _____	= _____ GPD

(*MA Title 5 use tables)

Application Checklist:

Form Complete _____
 Check _____
 Tiverton Tax Card _____
 Plat Map _____
 Site Plan _____

STREET OPENING PERMITS INITIALS
 TIVERTON DPW () Y () N _____
 FALL RIVER DPW: () Y () N _____

SEWER TIE-IN FEE : (Estimated Flow _____ GPD X \$5.00) = \$ _____

SEWER CONNECTION

APPROVED _____ DISAPPROVED _____

SUPERINTENDENT'S SIGNATURE _____ DATE: _____
 FALL RIVER SEWER COMMISSION _____ DATE: _____
 FALL RIVER DPW ENGINEERING _____ DATE: _____