



Town of Seabrook
SEWER DEPARTMENT
 274 RTE 286 • PO Box 456
 WRIGHT'S ISLAND
 SEABROOK, NEW HAMPSHIRE 03874

ABATEMENT APPROVAL REQUEST

Parcel ID: 7-13 Location: 49 Pages Ln Owner: Nathan Mawson Phone: 603-944-0523

Mailing Address: 34 Dearborn Ave Seabrook, NH 03874

Explanation: Application fees were assessed as a new service; property was found to have a previous connection resulting in fee reduction

Application Date: **May 31, 2019**

Original Fee: **\$800** Correct Fee: **\$100**

Amount Paid: **\$800** Check #996

Abatement Amount: **\$700**


 Curtis Slayton
 Sewer Superintendent

10/18/19
 Date

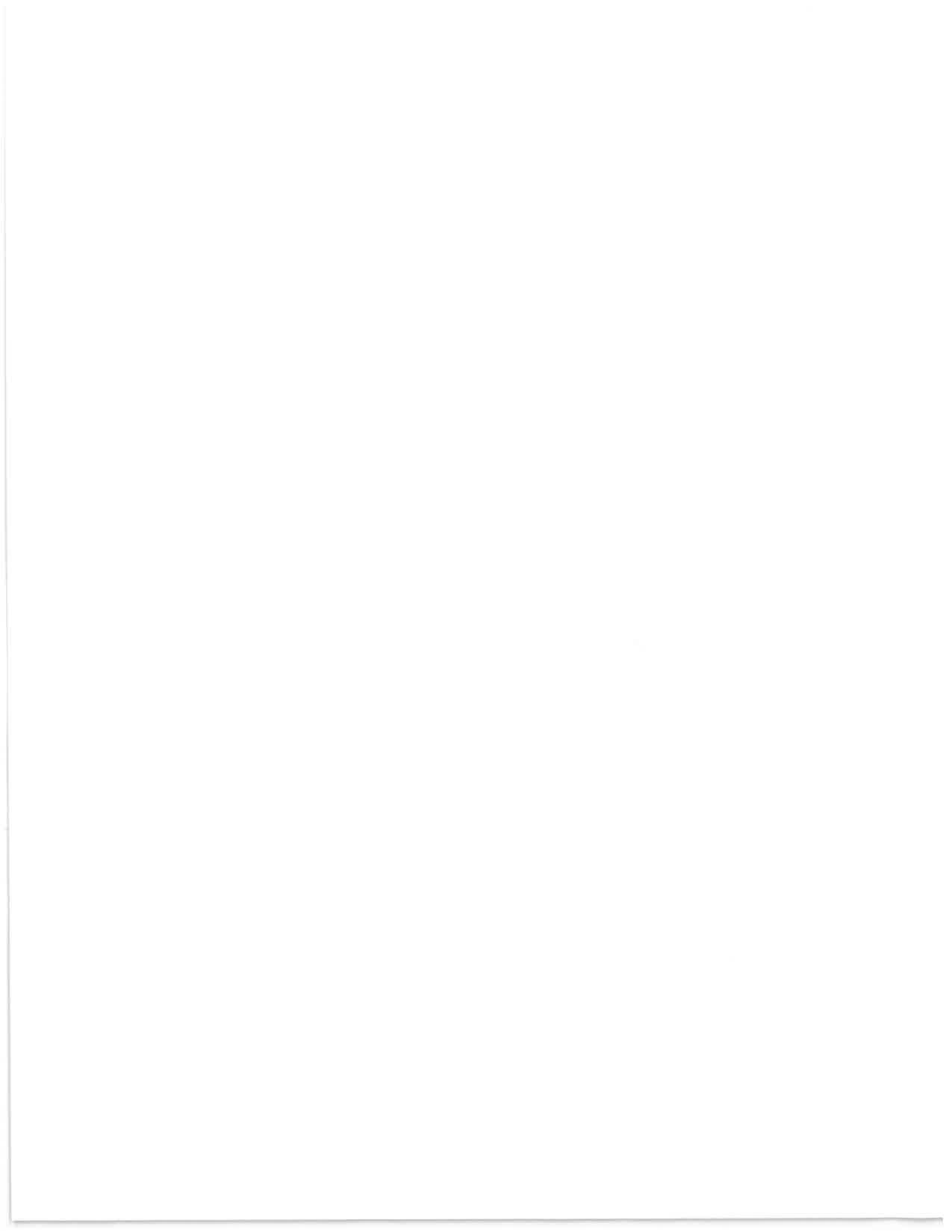
Date: _____

The above application for an abatement has been made per order:

 Aboul B. Kahn, Chairperson

 Theresa A. Kyle, Vice Chairperson

 Ella M. Brown, Clerk



**TOWN OF SEABROOK
SEWER DEPARTMENT &
WASTEWATER TREATMENT FACILITY**
PO BOX 456 • WRIGHT'S ISLAND • SEABROOK, NH 03874
PHONE (603) 474-8012 • FAX (603) 474-8014

RECEIVED

MAY 31 2019

SEWER DEPARTMENT
TOWN OF SEABROOK



APPLICATION FOR SEWER SERVICE

DATE: 5-14-19

APPLICANT / BUSINESS NAME Nathan Mawson

SERVICE ADDRESS 49 Pages LN

MAP _____ LOT _____ SEQ. _____ ZONING DISTRICT _____ IS LOT IN CURRENT USE? Y/N

MAILING ADDRESS 34 Dearborn Ave CITY Seabrook STATE NH ZIP 03874

PHONE _____ CELL 603-944-0525 EMAIL _____

PROPERTY OWNER (IF DIFFERENT THAN ABOVE) _____ PHONE _____

TYPE OF CONSTRUCTION (CHECK ALL THAT APPLY):

NEW CONSTRUCTION X RESIDENTIAL SINGLE-FAMILY X RESIDENTIAL MULTI-FAMILY _____

CONDO _____ MOBILE/MANUFACTURED HOME _____ COMMERCIAL _____ INDUSTRIAL _____

OTHER (PLEASE DESCRIBE): _____

BUILDING SIZE (IN SQUARE FEET) 1600

COMMENTS (IF APPLICABLE PLEASE LIST NO. OF BUILDINGS AND NO. OF UNITS):

FIXTURE COUNT

BATHROOM	KITCHEN	LAUNDRY	Misc
SHOWER/TUB COMBO <input type="checkbox"/>	SINKS <input type="checkbox"/>	WASHING MACHINE <input type="checkbox"/>	HOSEBIBS <input type="checkbox"/>
BATHTUB <input type="checkbox"/>	SINKS <input type="checkbox"/>	SINKS <input type="checkbox"/>	BAR SINKS <input type="checkbox"/>
SHOWER <input type="checkbox"/>	DISHWASHER <input type="checkbox"/>	OTHER <input type="checkbox"/>	POOL (SIZE) <input type="checkbox"/>
OVERSIZED BATHTUB (EX: JACUZZI, SOAKER) <input type="checkbox"/>	OTHER <input type="checkbox"/>		
SINKS <input type="checkbox"/>	TOILETS <input type="checkbox"/>		
TOILETS <input type="checkbox"/>	URINALS <input type="checkbox"/>		
URINALS <input type="checkbox"/>	BIDET <input type="checkbox"/>		
BIDET <input type="checkbox"/>			

PROPERTY OWNER SIGNATURE Nathan Mawson DATE: 5-14-19

APPLICANT / CORPORATION OFFICER SIGNATURE _____ DATE: _____

CORPORATION NAME: _____

OFFICERS NAME & TITLE (print) _____

I, Nathan Mawson agree that I will not hold the Seabrook Sewer Department responsible for any damages to my property, which may be incurred during, or as a result of the sewer service installation.



Nathan Mawson
Property Owner or Agent with Power of Attorney (Signature)

AMOUNT PAID \$806 CASH / CHECK # 996 DATE RECEIVED 5/31/19 BY JM

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House Service Connection Ties

Address: _____

Map: _____

Lot: _____

Seq: _____

Please provide a sketch of the service connection with the approximate length. Please indicate the name of the street and a sketch of the house. In addition please show the approximate distances from any water lines on the property:

SEE ATTACHED PLAN

Connection to Building

The applicant shall provide proper plumbing of building(s), which shall be in compliance with the International Plumbing Code as well as the rules and ordinances of the Town of Seabrook and the State of New Hampshire. The Town of Seabrook shall inspect and certify the plumbing, including the underground piping (before backfilling), prior to connection to the Town of Seabrook's sewer system.

--OFFICE USE ONLY--

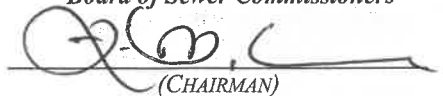
GRANTED DENIED DATE 6/17/19

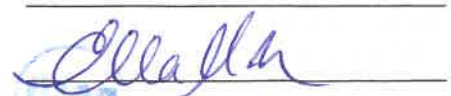
REASON FOR DENIAL: _____


Sewer Superintendent

6/6/19
Date

Board of Sewer Commissioners


(CHAIRMAN)



AMOUNT PAID 1800 CASH / CHECK # 996 DATE RECEIVED 5/31/19 BY jm

