



TOWN OF SEABROOK PUBLIC WATER SYSTEM

550 Route 107 ~ PO Box 456, Seabrook, NH 03874

Phone: (603) 474-9921 Fax: (603) 474-3399

WATER SERVICE APPLICATION

APPLICANT INFO SAME AS LANDOWNER? YES NO

DATE: 2/24/20

APPLICANT NAME/CORPORATION <u>Claire Knowles</u>	
APPLICANT ADDRESS <u>119 Lower Collins St</u>	HOME PHONE <u>603 944 0461</u>
CITY <u>SEABROOK</u>	ZIP CODE <u>03874</u>
E-MAIL ADDRESS OF APPLICANT <u>Claire.Knowles.57@FClock</u>	

LANDOWNER/BILLING NAME <u>Claire Knowles</u>	
BILLING ADDRESS <u>119 Lower Collins St</u>	HOME PHONE <u>603 944-0401</u>
CITY <u>Seabrook NH</u>	ZIP CODE <u>03874</u>
E-MAIL ADDRESS OF LANDOWNER <u>←</u>	

SERVICE ADDRESS: <u>43 True Rd.</u>	ASSESSOR'S MAP-LOT-SEQ: <u>2-19</u>
TYPE OF CONSTRUCTION: (Check All That Apply) <input type="checkbox"/> NEW CONSTRUCTION <input checked="" type="checkbox"/> RESIDENTIAL <input type="checkbox"/> SINGLE FAMILY <input type="checkbox"/> MULTI-FAMILY <input type="checkbox"/> CONDO	
<input type="checkbox"/> MOBILE/MANUFACTURED HOME <input type="checkbox"/> COMMERCIAL <input type="checkbox"/> INDUSTRIAL <input type="checkbox"/> OTHER (Please Describe) _____	
*UNDER 'ADDITIONAL COMMENTS' SECTION, LIST NO. OF BUILDINGS AND NO. OF UNITS IN EACH BUILDING, IF APPLICABLE	

NO. OF STORIES IN BUILDING: <u>one</u>	BUILDING SIZE IN SQUARE FEET: <u>768</u>	TOTAL PARCEL AREA IN SQUARE FEET: <u>30,232</u>
FIRE DEPARTMENT REQUIREMENTS <input checked="" type="radio"/> NONE <input type="radio"/> SPRINKLE ALL <input type="radio"/> SPRINKLE GARAGE ONLY		
FIRE HYDRANTS REQUIRED <input checked="" type="radio"/> NONE <input type="radio"/> PUBLIC (NO. OF HYDRANTS _____) <input type="radio"/> PRIVATE (NO. OF HYDRANTS _____)		
IS THERE A WELL ON THE PROPERTY? <input type="radio"/> YES <input checked="" type="radio"/> NO	USING RECYCLED WATER? <input type="radio"/> YES <input checked="" type="radio"/> NO	
WILL A PUMP BE USED TO BOOST PRESSURE? <input type="radio"/> YES - FIRE SERVICE <input type="radio"/> YES - DOMESTIC SERVICE <input checked="" type="radio"/> NO		
WILL THERE BE LANDSCAPE IRRIGATION? <input type="radio"/> YES <input checked="" type="radio"/> NO	IF YES, NUMBER OF SPRINKLER HEADS: _____	
FLOW OF EACH SPRINKLER HEAD IN GPM: <u>n/a</u>	TOTAL IRRIGATED AREA IN SQUARE FEET: _____	
IF NON-RESIDENTIAL, DESCRIBE BUSINESS TYPE OR USAGE OF LOT: _____		

SERVICES - LIST ALL REQUIRED PER PARCEL

POTABLE OR RECYCLED	SERVICE USE (RESIDENTIAL, FIRE, IRRIGATION, ETC.)	LATERAL SIZE	METER SIZE	MAX DEMAND IN GPM	ANTICIPATED DATE OF METER INSTALLATION
<u>potable</u>	<u>residential</u>	<u>—</u>	<u>5/8"</u>	<u>—</u>	<u>—</u>

FIXTURE UNIT COUNT - COMPLETE THE QUANTITY OF THE FOLLOWING

BATHROOM:		KITCHEN:		LAUNDRY ROOM:		MISC/OTHER:	
TUBS/SHOWERS <input checked="" type="checkbox"/>	JACUZZI TUBS <input type="checkbox"/>	DISHWASHERS <input type="checkbox"/>	SINKS <input type="checkbox"/>	CLOTHES WASHERS <input checked="" type="checkbox"/>	SINKS <input type="checkbox"/>	HOSE/BIBS <input type="checkbox"/>	
TUBS ONLY <input type="checkbox"/>	TOILETS <input checked="" type="checkbox"/>					BAR SINKS <input type="checkbox"/>	
SHOWERS ONLY <input type="checkbox"/>	URINALS <input type="checkbox"/>					POOL (SIZE: _____)	
SINKS <input checked="" type="checkbox"/>	BIDETS <input type="checkbox"/>					DESCRIBE: _____	

ADDITIONAL COMMENTS (IF APPLICABLE, LIST NO. OF BUILDINGS AND NO. IN EACH BUILDING) _____

LAND OWNER'S SIGNATURE Claire Knowles DATE 2/24/20

By signing above, I agree I will not hold the Seabrook Water Department responsible for any damages to my property, which may be incurred during, or as a result of the water installation.

***ALSO: THIS APPLICATION WILL EXPIRE 2 YEARS AFTER APPROVAL BY THE BOARD OF SELECTMEN and THE FEE WILL BE NONREFUNDABLE**

CORPORATION NAME _____ OFFICER'S NAME & TITLE (PRINT) _____
APPLICANT/CORPORATION'S OFFICER SIGNATURE X Claire Knowles DATE 2/24/20



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WATER SERVICE APPLICATION

Service Connection Ties

Address: 43 True Rd

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 sewer lines on the property.

See attached

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. Water lines are required to be inspected by the Water Department before backfilling.

-OFFICE USE ONLY-

GRANTED ___ DENIED ___ DATE _____

Board of Water Commissioners

REASON FOR DENIAL: _____

(Chairman)

Curt Skyles
Water Superintendent

2/25/2020
0 Date

AMOUNT PAID: \$ 1,300.00 CASH/CHECK # 605 DATE RECEIVED 2-24-20 BY EW.

437 sq ft

SR side entry
Driveway

ENTRY

72'

Existing mobile

16'

Existing porch

Extend porch

Common Wall

ENTRY

Proposed mudroom

88'

88'

88'

Entry

K-DMN

DINING ROOM

UTILITY

Entry

BR

BR

BATHROOM

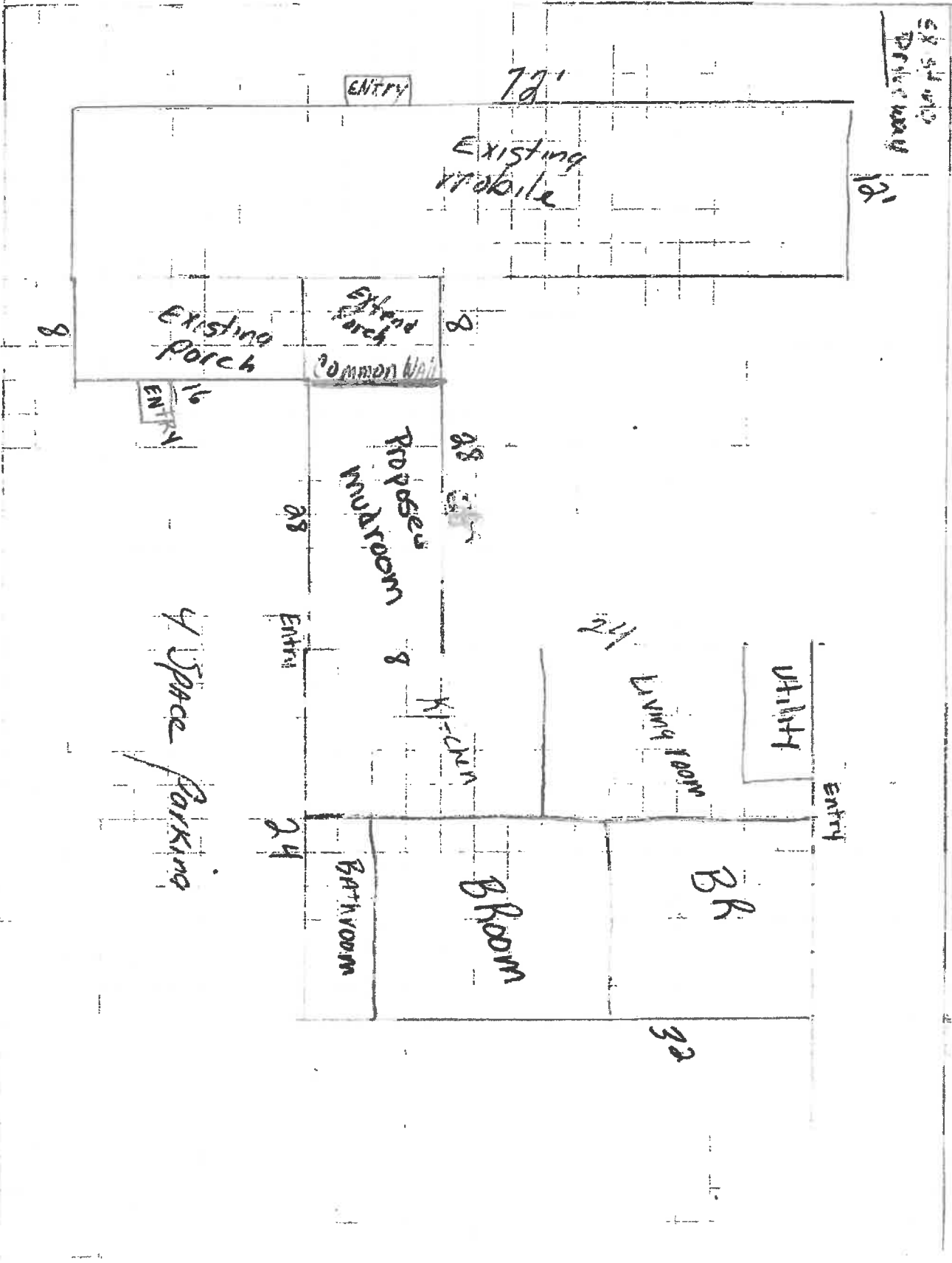
32

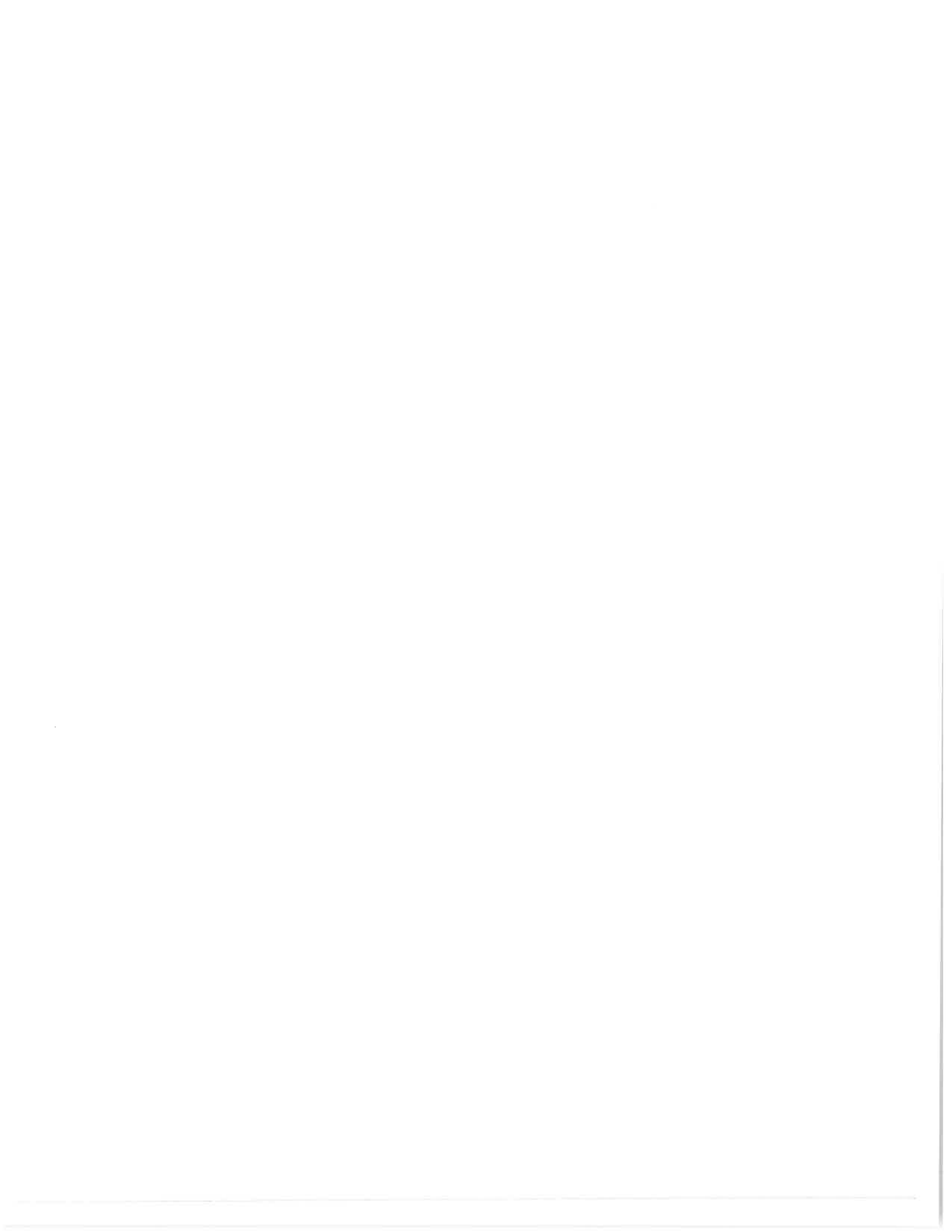
24

4 Space Parking

TRIDE lane

718 sq ft





N 16°32'09" E
149.94'
(DEED 150')

1 ROD S
(11-201)

OHW

1.3'

#43
EXISTING
DWELLING

OIL TANK

EXISTING
PAVED DRIVEWAY

EXISTING
GARAGE

2
19

30,232. S.F.
0.69 ACRES

SHED

199.51' TO I.P. FND.

BUILDING SETBACK
(TYPICAL)

S 75°15'18" E
204.29'
(DEED 200')

(DEED 150')
148.69'

0.3'

12.9'

