



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: 5/27/20

APPLICANT NAME/CORPORATION <u>Charles Morrill</u>			LANDOWNER/BILLING NAME <u>Charles Morrill</u>		
APPLICANT ADDRESS <u>3 Annes Lane</u>		HOME PHONE	BILLING ADDRESS <u>3 Cole St</u>		HOME PHONE <u>603-502-7746</u>
CITY <u>Seabrook NH</u>	ZIP CODE <u>03874</u>	WORK/OTHER PHONE <u>603-502-7746</u>	CITY <u>Hampton NH</u>	ZIP CODE <u>03842</u>	WORK/OTHER PHONE
E-MAIL ADDRESS OF APPLICANT <u>zima1959@comcast.net</u>			E-MAIL ADDRESS OF LANDOWNER <u>zima1959@comcast.net</u>		

SERVICE ADDRESS: 3 ANNES LANE ASSESSOR'S MAP-LOT-SEQ 14-25-2

TYPE OF CONSTRUCTION: (Check All That Apply) NEW CONSTRUCTION RESIDENTIAL MULTI-FAMILY CONDO

MOBILE/MANUFACTURED HOME COMMERCIAL INDUSTRIAL OTHER (Please Describe 3 Car Garage)

*UNDER 'ADDITIONAL COMMENTS' SECTION, LIST NO. OF BUILDINGS AND NO. OF UNITS IN EACH BUILDING, IF APPLICABLE

NO. OF STORIES IN BUILDING: 1 BUILDING SIZE IN SQUARE FEET: 1200 sq ft TOTAL PARCEL AREA IN SQUARE FEET: 29,426 sq ft

FIRE DEPARTMENT REQUIREMENTS NONE SPRINKLE ALL SPRINKLE GARAGE ONLY

FIRE HYDRANTS REQUIRED NONE PUBLIC (NO. OF HYDRANTS) PRIVATE (NO. OF HYDRANTS)

IS THERE A WELL ON THE PROPERTY? YES NO USING RECYCLED WATER? YES NO

WILL A PUMP BE USED TO BOOST PRESSURE? YES - FIRE SERVICE YES - DOMESTIC SERVICE NO

WILL THERE BE LANDSCAPE IRRIGATION? YES NO IF YES, NUMBER OF SPRINKLER HEADS:

FLOW OF EACH SPRINKLER HEAD IN GPM: 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 (garage)</u>	<u>1/2"</u>	<u>N/A</u>	<u>Minimal</u>	<u>N/A</u>

FIXTURE UNIT COUNT - COMPLETE THE QUANTITY OF THE FOLLOWING

BATHROOM:		KITCHEN:		LAUNDRY ROOM:		MISC/OTHER:	
TUBS/SHOWERS	JACUZZI TUBS	DISHWASHERS	SINKS	CLOTHES WASHERS	SINKS	HOSE BIBS	
TUBS ONLY	TOILETS <u>1</u>					BAR SINKS	
SHOWERS ONLY <u>1</u>	URINALS					POOL (SIZE: <u> </u>)	
SINKS <u>1</u>	BIDETS					DESCRIBE:	

ADDITIONAL COMMENTS (IF APPLICABLE, LIST NO. OF BUILDINGS AND NO. IN EACH BUILDING) 1 story garage, bath for use during summer gatherings around pool. (to be installed)

LAND OWNER'S SIGNATURE Charles Morrill DATE 5/13/20

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 Charles Morrill DATE 5/13/20



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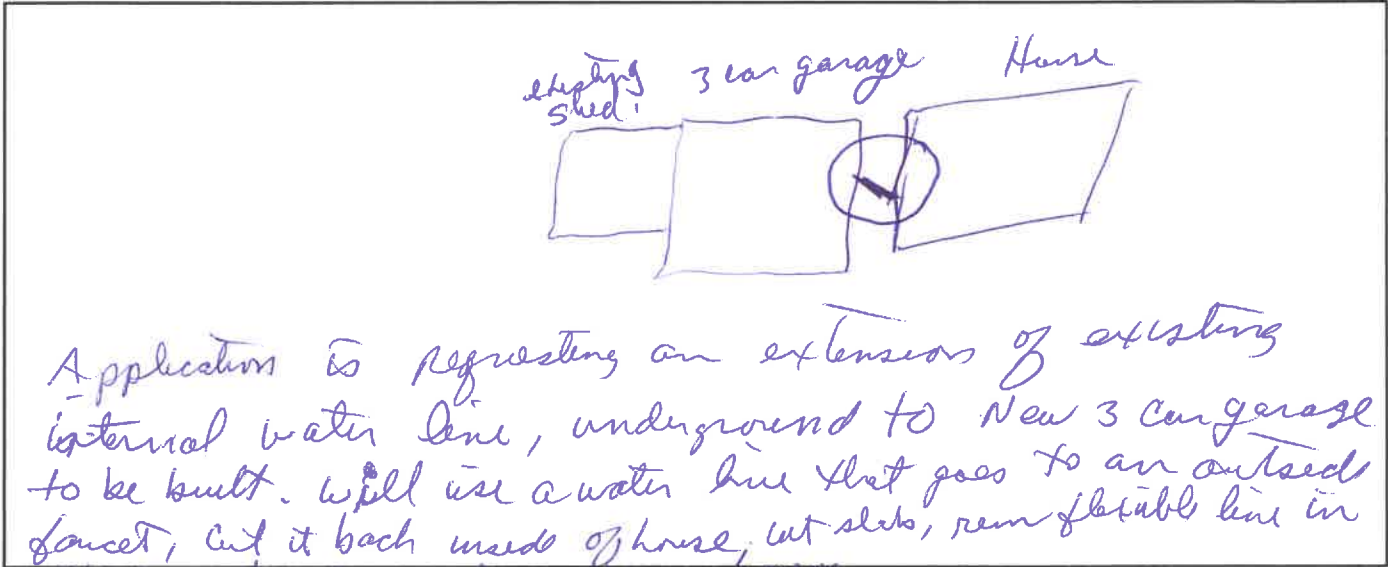
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WATER SERVICE APPLICATION

Service Connection Ties

Address: 3 Amos Lane Seabrook, NH 03874

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.



Application is requesting an extension of existing internal water line, underground to new 3 car garage to be built. Will use a water line that goes to an outside faucet, cut it back inside of house, cut slab, run flexible line in 3" pipe to garage & up into space.

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)

Cat. Skyles
Water Superintendent

5/28/2020

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Date

AMOUNT PAID: \$ 50

CASH/CHECK # 3334

5-27-20

BY Sib.