

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



APPLICATION FOR SEWER SERVICE

DATE: 7-27-2021

APPLICANT / BUSINESS NAME Philip Franciosa
 SERVICE ADDRESS 3B Almyra Way.
 MAP 10 LOT 90 SEQ. _____ ZONING DISTRICT _____ IS LOT IN CURRENT Use? Y (N)
 MAILING ADDRESS 10 Merrimac Street CITY Seabrook STATE NH ZIP 03874
 PHONE _____ CELL 878-270-6826 EMAIL pfranciosa27@gmail.com
 PROPERTY OWNER (IF DIFFERENT THAN ABOVE) _____ PHONE _____

TYPE OF CONSTRUCTION (CHECK ALL THAT APPLY):

NEW CONSTRUCTION ☒ RESIDENTIAL SINGLE-FAMILY _____ RESIDENTIAL MULTI-FAMILY ☒
 CONDO ☒ MOBILE/MANUFACTURED HOME _____ COMMERCIAL _____ INDUSTRIAL _____
 OTHER (PLEASE DESCRIBE): _____

BUILDING SIZE (IN SQUARE FEET) 1750 +/- per unit

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

1 Building 48' x 44'
2 units in Building

FIXTURE COUNT

BATHROOM		KITCHEN		LAUNDRY		Misc	
SHOWER/TUB COMBO	<u>2</u>	SINKS	<u>3</u>	WASHING MACHINE	<u>1</u>	HOSEBIBS	<u>2</u>
BATHTUB		TOILETS	<u>3</u>	DISHWASHER	<u>1</u>	BAR SINKS	
SHOWER		URINALS		OTHER		POOL (SIZE)	
OVERSIZED BATHTUB (EX: JACUZZI, SOAKER)		BIDET					

PROPERTY OWNER SIGNATURE [Signature] DATE: 7-22-2021
 APPLICANT / CORPORATION OFFICER SIGNATURE Same As Above DATE: _____
 CORPORATION NAME: _____
 OFFICERS NAME & TITLE (print) _____

I, Philip Franciosa 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.

[Signature]
 Property Owner or Agent with Power of Attorney (Signature)

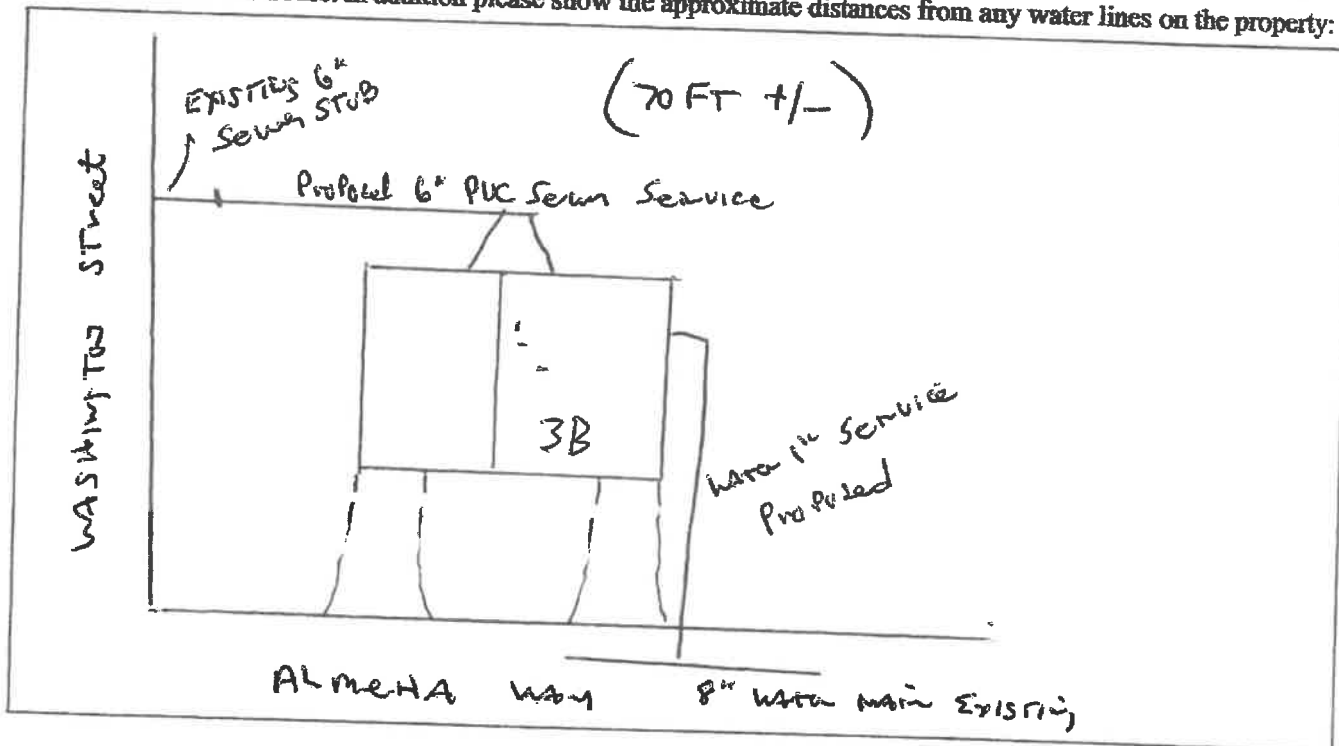
AMOUNT PAID \$ 200.00 CASH / CHECK # 1416 DATE RECEIVED 7-27-21 BY CURTIS

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Address: 3B Almeida Way House Service Connection Ties
 Map: 10 Lot: 90 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:



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 _____

Board of Sewer Commissioners

REASON FOR DENIAL: _____

 (CHAIRMAN)

[Signature]
 Sewer Superintendent

7/27/21

Date

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