

REFUND APPROVAL REQUEST

Account Number: 144850 Map/Lot/Sequence: 10-90 Bill #: appl / no # Amount: \$ 1,350.00

Owner Name: Franciosa Philip

Owner Name: _____

Mailing Address: 10 Merrimac St , Seabrook, NH 03874

Parcel Location: 3A & 3B Almena Way

REFUND: Contractor cannot do what he intended due to a title problem and would like his application fees returned.


Curtis Slayton
Water & Sewer Superintendent

Date: 8/12/21

DATE: _____ BY VOTE OF THE BOARD OF SELECTMEN,
THE ABOVE APPLICATION FOR A REFUND HAS BEEN MADE PER ORDER,

Ella M Brown, Chairperson

Aboul B Khan, Vice Chairperson

Theresa A Kyle, Clerk

Respectfully submitted,
E Wasson

Vendor Slip		
Vendor #	Franciosa Philip	
Invoice #	7/22/2021	
Description	Refund	
Invoice Date	08/12/21	
Invoice Total	1,350.00	
G/L # (water)	<u>20-520-34020-001</u>	\$ <u>1,350.00</u>
G/L # (sewer)	<u>21-521-35020-001</u>	\$ _____
Approved By:	_____	Date: <u>08/12/21</u>
Hold Check?	_____	

Original: Finance CC: Water Office

To the Town of Seabrook Water Department,

I am writing this letter to formally request that the Water Connection Applications for 3A and 3B Almena Way be withdrawn from the August 16th, 2021 Board of Selectmen hearing. In doing so, I would also like to request a refund for the fees paid on both applications.

Sincerely,
Phil Franciosa



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: 7-22-2021

APPLICANT NAME/CORPORATION

Philip Franciosa

APPLICANT ADDRESS

10 Merrimac Street

HOME PHONE

978-220-6826

CITY

Seabrook, NH

ZIP CODE

03874

WORK/OTHER PHONE

E-MAIL ADDRESS OF APPLICANT

Pfranciosa27@gmail.com

LANDOWNER/BILLING NAME

BILLING ADDRESS

HOME PHONE

CITY

ZIP CODE

WORK/OTHER PHONE

E-MAIL ADDRESS OF LANDOWNER

SERVICE ADDRESS:

31A Almena Way

ASSESSOR'S MAP-LOT-SEQ:

10-90

TYPE OF CONSTRUCTION: (Check All That Apply)

NEW CONSTRUCTION ☒

RESIDENTIAL ☒

SINGLE FAMILY

MULTI-FAMILY ☒

CONDO ☒

MOBILE/MANUFACTURED HOME

COMMERCIAL

INDUSTRIAL

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:

2

BUILDING SIZE IN SQUARE FEET:

1750 +/-

TOTAL PARCEL AREA IN SQUARE FEET:

30,000

FIRE DEPARTMENT REQUIREMENTS

☒ NONE

SPRINKLE ALL

per unit

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

Potable
Potable

Residential
Residential

FIXTURE UNIT COUNT - COMPLETE THE QUANTITY OF THE FOLLOWING

BATHROOM:

TUBS/SHOWERS

2

JACUZZI TUBS

0

TUBS ONLY

TOILETS

3

SHOWERS ONLY

URINALS

0

SINKS

3

BIDETS

0

KITCHEN:

DISHWASHERS

1

SINKS

1

LAUNDRY ROOM:

CLOTHES WASHERS

1

SINKS

0

MISC/OTHER:

HOSEBIBS

2

BAR SINKS

0

POOL (SIZE:)

DESCRIBE:

0

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

2 units

1 48'x44' Building with

LAND OWNER'S SIGNATURE

DATE 7-22-2021

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

DATE 7-22-2021



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: 7-22-2021

APPLICANT NAME/CORPORATION Philip Franciosa

APPLICANT ADDRESS 10 Merrimac Street HOME PHONE 978-270-6826

CITY Seabrook, NH ZIP CODE 03874 WORK/OTHER PHONE _____

E-MAIL ADDRESS OF APPLICANT Pfranciosa27@gmail.com

LANDOWNER/BILLING NAME _____

BILLING ADDRESS _____ HOME PHONE _____

CITY _____ ZIP CODE _____ WORK/OTHER PHONE _____

E-MAIL ADDRESS OF LANDOWNER _____

SERVICE ADDRESS: 3B Almena Way ASSESSOR'S MAP-LOT-SEQ: 10-90

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

☐ MOBILE/MANUFACTURED HOME ☐ COMMERCIAL ☐ INDUSTRIAL ☐ 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: 2 BUILDING SIZE IN SQUARE FEET: 1750 +/- TOTAL PARCEL AREA IN SQUARE FEET: 30,000

FIRE DEPARTMENT REQUIREMENTS ☒ NONE ☐ SPRINKLE ALL per unit ☐ 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
Potable	Residential	—	5/8"	—	—
Potable	Residential	—	5/8"	—	—

FIXTURE UNIT COUNT - COMPLETE THE QUANTITY OF THE FOLLOWING

BATHROOM:		KITCHEN:		LAUNDRY ROOM:		MISC/OTHER:	
TUBS/SHOWERS <u>2</u>	JACUZZI TUBS _____	DISHWASHERS <u>1</u>	CLOTHES WASHERS <u>1</u>			HOSE BIBS <u>2</u>	
TUBS ONLY _____	TOILETS <u>3</u>	SINKS <u>1</u>	SINKS _____			BAR SINKS _____	
SHOWERS ONLY _____	URINALS _____					POOL (SIZE: _____)	
SINKS <u>3</u>	BIDETS _____					DESCRIBE: _____	

ADDITIONAL COMMENTS (IF APPLICABLE, LIST NO. OF BUILDINGS AND NO. IN EACH BUILDING) 1 48'x44' Building with 2 units

LAND OWNER'S SIGNATURE _____ DATE 7-22-2021

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 _____ DATE 7-22-2021