

**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: 6/14/23

APPLICANT / BUSINESS NAME NICOLAS V. AUGER SR.

SERVICE ADDRESS 7 ZAGARELLA CIR

MAP 2 LOT 51 SEQ. 4 ZONING DISTRICT \_\_\_\_\_ IS LOT IN CURRENT USE? Y/N \_\_\_\_\_

MAILING ADDRESS SAME CITY SEABROOK STATE N.H. ZIP 03874

PHONE 603-765-8260 CELL \_\_\_\_\_ EMAIL NICK AUGER 86@9mail.com

PROPERTY OWNER (IF DIFFERENT THAN ABOVE) \_\_\_\_\_ PHONE 603-765-8260

**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) 1344 28x48

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

**FIXTURE COUNT**

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

PROPERTY OWNER SIGNATURE Nicolas V. Auger Sr. DATE: 6/14/23

APPLICANT / CORPORATION OFFICER SIGNATURE \_\_\_\_\_ DATE: \_\_\_\_\_

CORPORATION NAME: \_\_\_\_\_

OFFICERS NAME & TITLE (print) \_\_\_\_\_

I, NICOLAS V. AUGER SR. 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.

Nicolas Auger  
 Property Owner or Agent with Power of Attorney (Signature)



**House Service Connection Ties**

Address: 7 ZAGARELLA CIR

Map: 2

Lot: 51

Seq: 4

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] 7/31/23  
 Sewer Superintendent Date

Amount Paid \$ 800.00 Cash/Check# 123 Date 7-31-23 By S.G.