



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: 11/26/23

APPLICANT NAME/CORPORATION T. Park Realty Alexis Garrant		LANDOWNER/BILLING NAME T. Park Realty	
APPLICANT ADDRESS PO Box 359		BILLING ADDRESS PO Box 359	
CITY/STATE Hampton Falls NH	HOME/WORK PHONE 603-918-8906	CITY/STATE Hampton Falls NH	HOME/WORK PHONE
ZIP CODE 03844	WORK/OTHER PHONE	ZIP CODE 03844	WORK/OTHER PHONE
E-MAIL ADDRESS OF APPLICANT tpark7@yahoo.com		E-MAIL ADDRESS OF LANDOWNER tpark7@yahoo.com	

SERVICE ADDRESS: 3 A Street ASSESSOR'S MAP-LOT-SEQ:

TYPE OF CONSTRUCTION: (Check All That Apply)

NEW CONSTRUCTION RESIDENTIAL SINGLE FAMILY MULTI-FAMILY CONDO

MOBILE/MANUFACTURED HOME COMMERCIAL INDUSTRIAL (Please Describe)

**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: 880 TOTAL PARCEL AREA IN SQUARE FEET:

FIRE DEPARTMENT REQUIREMENTS NONE SPRINKLE ALL SPRINKLE GARAGE ONLY

FIRE HYDRANTS REQUIRED NONE PUBLIC (NO. OF HYDRANTS) PRIVATE (NO. OF HYDRANTS 2)

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"	-	-

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	BAR SINKS
1	0	1	1	1	0	0	0
TUBS ONLY	TOILETS					POOL (SIZE:)	DESCRIBE:
0	1						
SHOWERS ONLY	URINALS						
0	0						
SINKS	BIDETS						
1	0						

Existing LINE

LAND OWNER'S SIGNATURE

DATE 11/26/23

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 11/26/23

ACCOUNT #

200077



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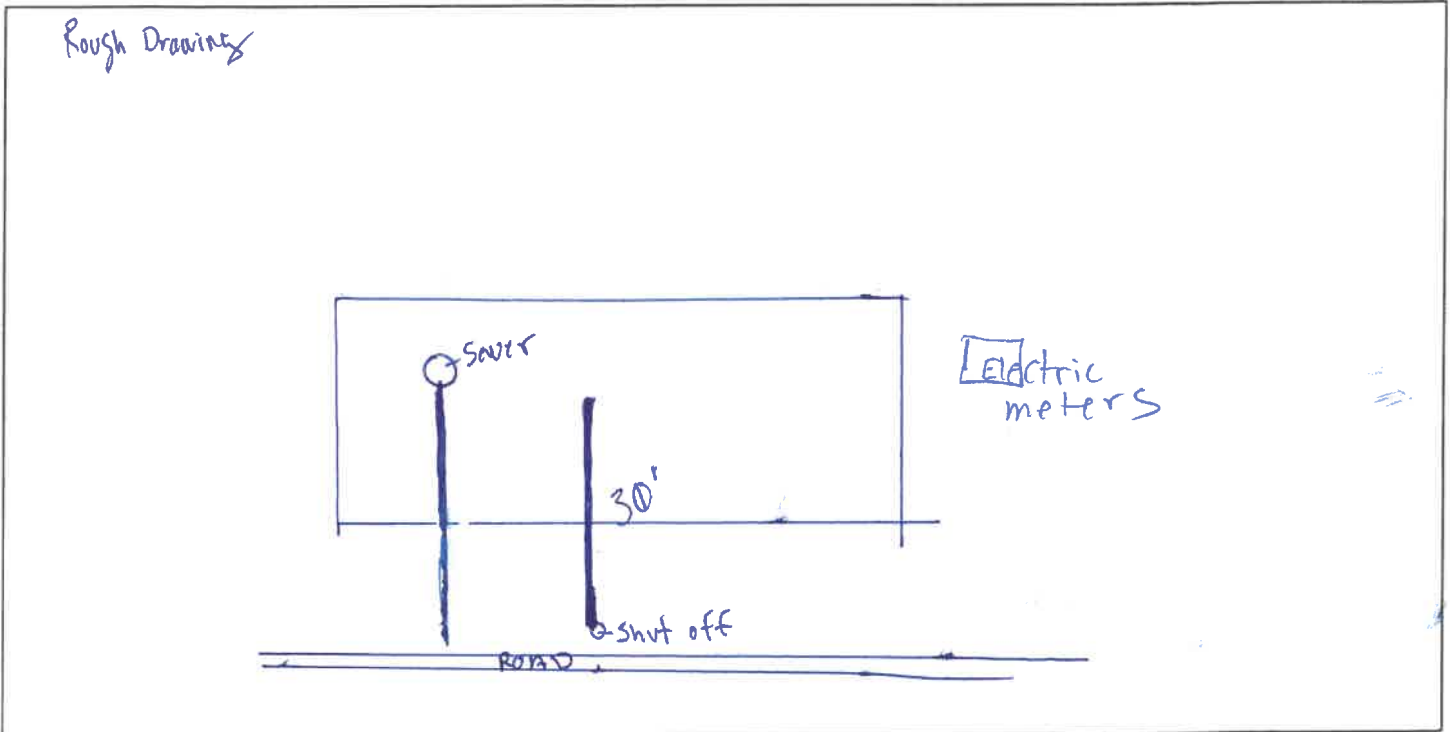
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WATER SERVICE APPLICATION

Service Connection Ties

Address: 3 A St.

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.



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)

[Signature]
Water Superintendent

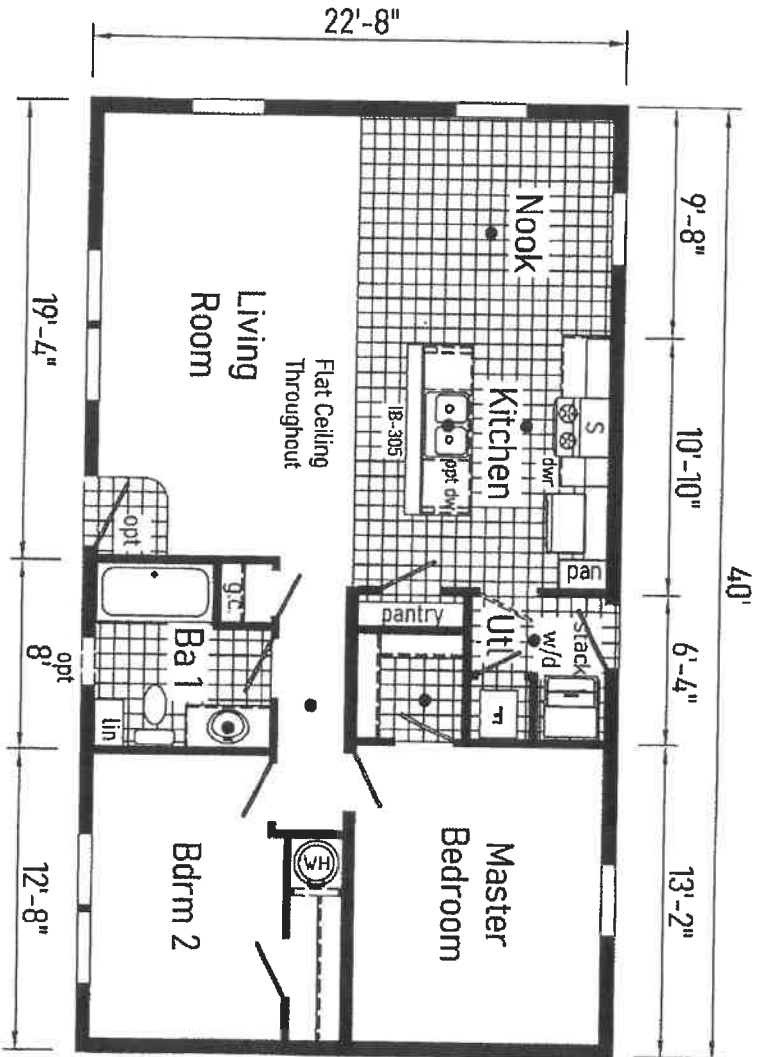
11/28/23
Date

AMOUNT PAID: \$50

CASH/CHECK # 167

DATE RECEIVED 11-27-23

BY MS



3A2601-EB-ML01 2440 Approx. 906 Sq. Ft.

Builder:	Commodore Homes of Pennsylvania	Address:	20098 Paint Blvd, Shippenville, PA 16254	Callout:	2440	Revisions:		Scale:	1/8" = 1'-0"	Date:	11/20/2023	Cust. Benoit:	Dir. New Style	Model/Eng. No.:	3A2601-FR-M1 01
Title:	Iteration	Drawn By:		Reference:											

