



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: 2-15-24

APPLICANT NAME/CORPORATION: Steve Lago, Spednik, LLC
 APPLICANT ADDRESS: 48 Blacksnake Rd.
 CITY: Seabrook NH ZIP CODE: 03874
 E-MAIL ADDRESS OF APPLICANT: Spednik LLC@gmail.com

LANDOWNER/BILLING NAME: SAME
 BILLING ADDRESS: _____ HOME PHONE: _____
 CITY: _____ ZIP CODE: _____ WORK/OTHER PHONE: _____
 E-MAIL ADDRESS OF LANDOWNER: _____

SERVICE ADDRESS: 20 Adder Lane 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 OTHER (Please Describe): Changed to existing
 *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: 1500 TOTAL PARCEL AREA IN SQUARE FEET: 7500
 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
Potable	Residential				June 2024

FIXTURE UNIT COUNT - COMPLETE THE QUANTITY OF THE FOLLOWING

BATHROOM:		KITCHEN:		LAUNDRY ROOM:		MISC/OTHER:	
TUBS SHOWERS	<u>1</u>	JACUZZI TUBS		DISH WASHERS	<u>1</u>	CLOTHES WASHERS	<u>1</u>
TUBS ONLY		TOILETS	<u>2</u>	SINKS	<u>1</u>	SINKS	
SHOWERS ONLY	<u>1</u>	URINALS				POOL (SIZE: _____)	
SINKS	<u>93</u>	BIDETS				DESCRIBE: _____	

ADDITIONAL COMMENTS (IF APPLICABLE, LIST NO. OF BUILDINGS AND NO. IN EACH BUILDING) Old meter pit from previously demolished home will no longer be used.

LAND OWNER'S SIGNATURE: [Signature] DATE: 2-15-24
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 7 YEARS AFTER APPROVAL BY THE BOARD OF SELECTMEN and THE FEE WILL BE NONREFUNDABLE**

CORPORATION NAME: Spednik, LLC OFFICER'S NAME & TITLE (PRINT): Steve Lago Owner

APPLICANT/CORPORATION'S OFFICER SIGNATURE: [Signature] DATE: 2-15-24



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Service Connection Ties

Address: 20 Adder 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.



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

2/20/24
Date

AMOUNT PAID: 50.⁰⁰

CASH/CHECK # 8789

DATE RECEIVED 2/16/24

BY *[Signature]*