TOWN OF SEABROOK SEWER DEPARTMENT &

AMOUNT PAID 100.00

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: 4/23/2024

APPLICANT / BUSINESS N	IAME CHUCK L	HITE / G	RAY CONS	TRUCTION	
SERVICE ADDRESS		/			
MAP 22 LOT	6 SEQ.	Zo	NING DISTRICT	Is Lot in Cu	RRENT USE? Y/N
MAILING ADDRESS PO	3 Box 252		CITY RYE	STATE NA	ZIP 03870
PHONE				chuckegraycontro	
PROPERTY OWNER (IF DIFF				Phone	
TYPE OF CONSTRUCT NEW CONSTRUCTION V CONDO MOBILE/N OTHER (PLEASE DESCRIBE): BUILDING SIZE (IN SQUARE F COMMENTS (IF APPLICABLE PLE	RESIDENTIAL SING	GLE-FAMILY V E COMM			
BATHROO	M	FIXTURE KITCHEN	COUNT LAUN	DRY	Misc
SHOWER/TUB COMBO BATHTUB SHOWER	SINKS I TOILETS URINALS	SINKS DISHWASHER OTHER	WASHING MA SINKS OTHER	CHINE 2 HOSEBIBE BAR SINK POOL (SIZ	ks 1
Oversized Bathtub (ex: Jacuzzi, Soaker)	BIDET		Inches and the second		***************************************
PROPERTY OWNER SIGNATURE	RE		1 00 1	DATE:	
Applicant / Corporation	OSE W		100	DATE:	4/23/2024
OFFICERS NAME & TITLE (pr	ty Owner (print)	agree th	at I will not hold	the Seabrook Sewer De	
installation.			SEE AT	Metters	4
			Property Owner or A	agent with Power of Attorney (S	ignature)

Cash / Check # 3/97 Date Received 4-23-24 By Sc.

TOWN OF SEABROOK SEWER DEPARTMENT &

WASTEWATER TREATMENT FACILITY

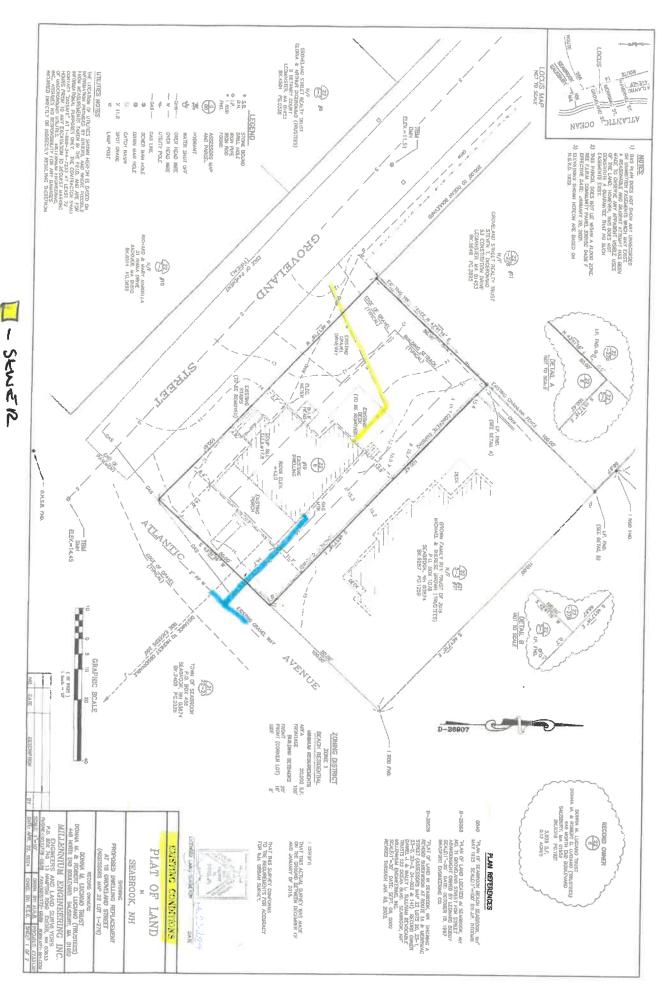
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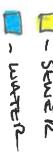


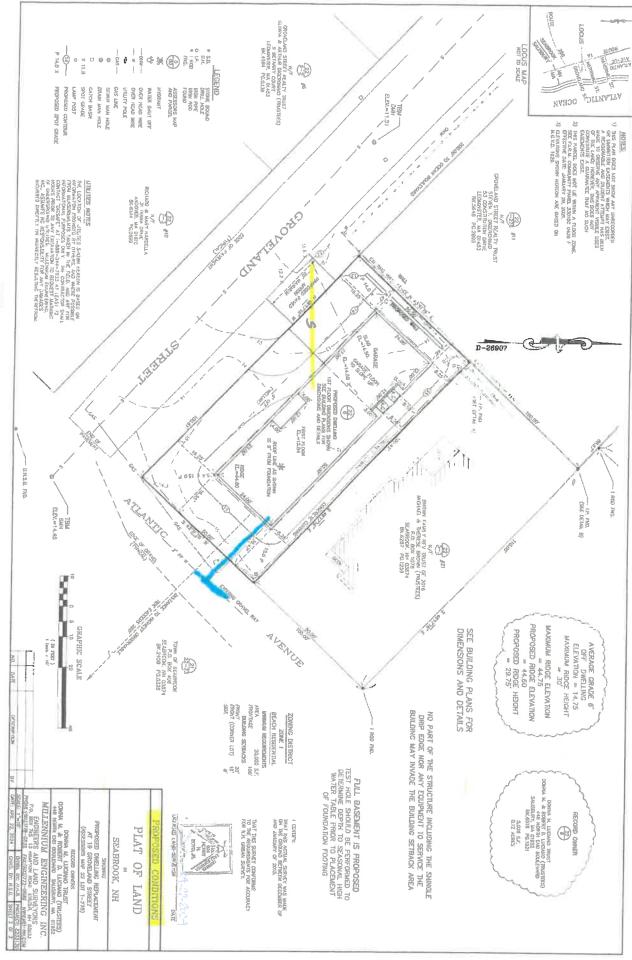
House Service Connection Ties

Address	s: 19	GROVELAND STR		ec connection ries	
Map:	22		6	Seq:	
Please p	provide a s ketch of th	sketch of the service connection he house. In addition please sho	with the w the app	e approximate length. Please indicate the name o proximate distances from any water lines on the	f the stree
	SEE	= ATTACHET	2	EXISTING + PROPOSES	<i>D</i>
				5.	
	State of Ne	provide proper plumbing of buildi Code as well as the rules a w Hampshire. The Town of Seabro	ng(s), whi and ordina ook shall i	b Building aich shall be in compliance with the International Plur ances of the Town of Seabrook inspect and certify the plumbing, including the under a to the Town of Seabrook's sewer system.	_
		OF	FICE US	SE ONLY	
	GRAN	TED DENIED DATE		Board of Sewer Commissione	ers
REA	ASON FOR D	DENIAL:		(CHAIRMAN)	
Sewer.	Supering	Tent 4/24/24	Date		
					—)

AMOUNT PAID	CASH / CHECK #	DATE RECEIVED	Ву









- SEWER

- WATER-