



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: 4/17/24

Form with fields for APPLICANT NAME/CORPORATION (Matthew Ertan Builders LLC), APPLICANT ADDRESS (10 Gove Rd), LANDOWNER/BILLING NAME (Kim Carbone), BILLING ADDRESS (110 Stumpfield Rd), CITY (Kensington), ZIP CODE (03833), HOME PHONE (603 777 7097), WORK/OTHER PHONE (603 770-1900), and E-MAIL ADDRESS OF APPLICANT (met@comcast.net).

Form with fields for SERVICE ADDRESS (141 South Main St), ASSESSOR'S MAP-LOT-SEQ., TYPE OF CONSTRUCTION (NEW CONSTRUCTION, RESIDENTIAL, SINGLE FAMILY, MULTI-FAMILY, CONDO, MOBILE/MANUFACTURED HOME, COMMERCIAL, INDUSTRIAL, OTHER), and a note to list buildings and units under additional comments.

Form with fields for NO. OF STORIES IN BUILDING (1), BUILDING SIZE IN SQUARE FEET, TOTAL PARCEL AREA IN SQUARE FEET, FIRE DEPARTMENT REQUIREMENTS, FIRE HYDRANTS REQUIRED, IS THERE A WELL ON THE PROPERTY?, WILL A PUMP BE USED TO BOOST PRESSURE?, WILL THERE BE LANDSCAPE IRRIGATION?, FLOW OF EACH SPRINKLER HEAD IN GPM, and TOTAL IRRIGATED AREA IN SQUARE FEET.

SERVICES - LIST ALL REQUIRED PER PARCEL

Table with columns: POTABLE OR RECYCLED, SERVICE USE (RESIDENTIAL, FIRE, IRRIGATION, ETC.), LATERAL SIZE, METER SIZE, MAX DEMAND IN GPM, and ANTICIPATED DATE OF METER INSTALLATION.

FIXTURE UNIT COUNT - COMPLETE THE QUANTITY OF THE FOLLOWING

Form with columns for BATHROOM, KITCHEN, LAUNDRY ROOM, and MISC/OTHER, listing fixture counts for tubs/showers, toilets, urinals, bidets, dishwashers, sinks, clothes washers, and hose bibs.

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

LAND OWNER'S SIGNATURE: Kim Carbone DATE: 4-15-24

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 2 YEARS AFTER APPROVAL BY THE BOARD OF SELECTMEN and THE FEE WILL BE NONREFUNDABLE

CORPORATION NAME: Matthew Ertan Builders LLC OFFICER'S NAME & TITLE (PRINT)

APPLICANT/CORPORATION'S OFFICER SIGNATURE: Matthew Ertan DATE

Account # 122950

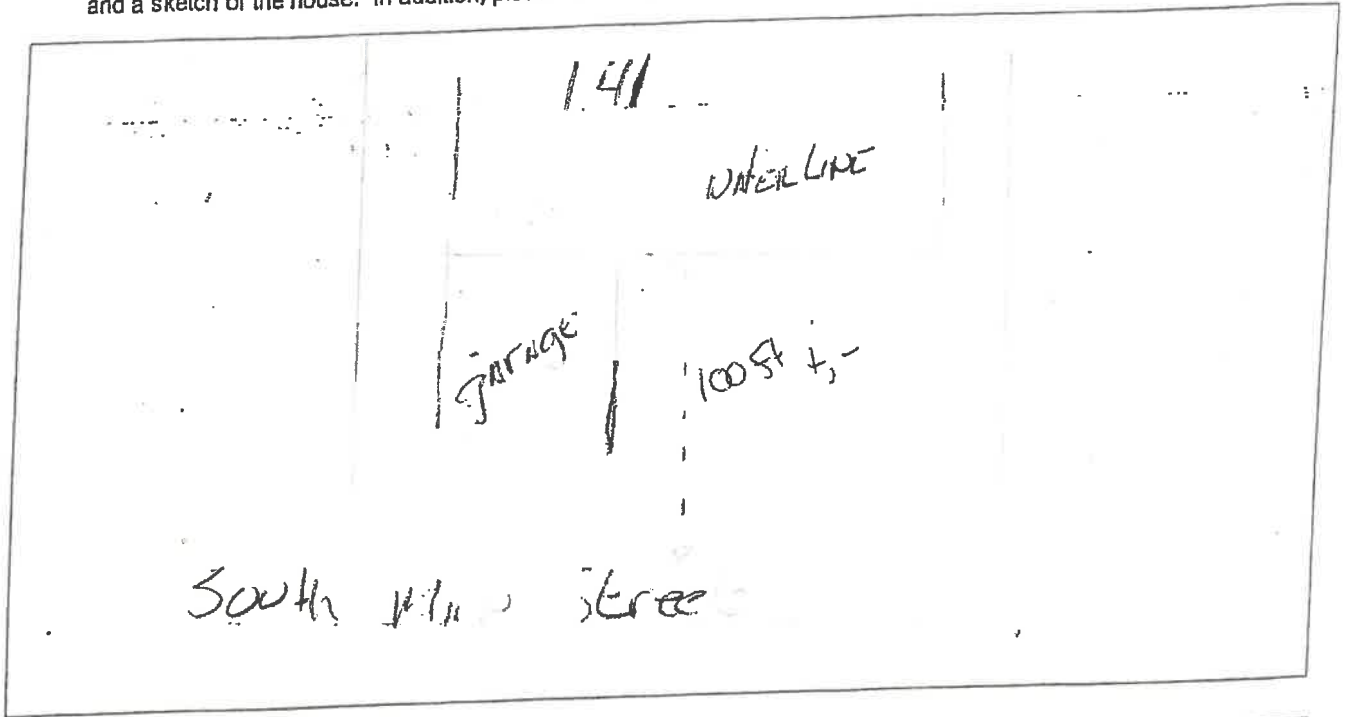


TOWN OF SEABROOK PUBLIC WATER SYSTEM
 550 Route 107 - PO Box 456, Seabrook, NH 03874
 Phone: (603) 474-9921 Fax: (603) 474-3399
WATER SERVICE APPLICATION

Service Connection Ties

Address: 141 South Main 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)

Water Superintendent

4/18/24
Date

AMOUNT PAID: \$100-

CASH/CHECK # 1160

DATE RECEIVED 4-17-24

BY MS