



# 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: 10/15/2024

APPLICANT NAME/CORPORATION <i>Genetti's General Cont. Inc.</i>		LANDOWNER/BILLING NAME <i>Rick Abraham</i>	
APPLICANT ADDRESS <i>222 Pond St.</i>		BILLING ADDRESS	HOME/WORK PHONE
CITY/STATE <i>North Berwick, MA</i>	ZIP CODE <i>01862</i>	WORK/OTHER PHONE	
E-MAIL ADDRESS OF APPLICANT <i>mike.genetti@ComCast.net</i>		E-MAIL ADDRESS OF LANDOWNER <i>Kitmot15@hotmail.com</i>	

SERVICE ADDRESS: *193 Tilton St. Seabrook, NH* ASSESSOR'S MAP-LOT-SEQ: *20*

TYPE OF CONSTRUCTION: (Check All That Apply)  NEW CONSTRUCTION  RESIDENTIAL  SINGLE FAMILY  MULTI-FAMILY  CONDO

MOBILE/MANUFACTURED HOME  COMMERCIAL  INDUSTRIAL (Please Describe) *Replacing old line*

\*UNDER 'ADDITIONAL COMMENTS' SECTION, LIST NO. OF BUILDINGS AND NO. OF UNITS IN EACH BUILDING, IF APPLICABLE

NO. OF STORIES IN BUILDING: *3* BUILDING SIZE IN SQUARE FEET: *6,903* TOTAL PARCEL AREA IN SQUARE FEET: *5000*

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: *12*

FLOW OF EACH SPRINKLER HEAD IN GPM: *2.6* TOTAL IRRIGATED AREA IN SQUARE FEET: *400 +/-*

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	
<i>1</i>	<i>1</i>	<i>1</i>	<i>1</i>	<i>1</i>	<i>1</i>	<i>2</i>	
TUBS ONLY	TOILETS					BAR SINKS	
<i>0</i>	<i>4</i>					<i>1</i>	
SHOWERS ONLY	URINALS					POOL (SIZE: _____)	
<i>3</i>	<i>0</i>					<i>0</i>	
SINKS	BIDETS					DESCRIBE:	
<i>6</i>	<i>0</i>						

LAND OWNER'S SIGNATURE

DATE

*10/20/24*

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 *Genetti's General Cont. Inc.* OFFICER'S NAME & TITLE (PRINT) *michael Genetti owner/President*

APPLICANT/CORPORATION'S OFFICER SIGNATURE

DATE

*9/19/2024*

ACCOUNT #

*177456*



**TOWN OF SEABROOK PUBLIC WATER SYSTEM**

550 Route 107 ~ PO Box 456, Seabrook, NH 03874

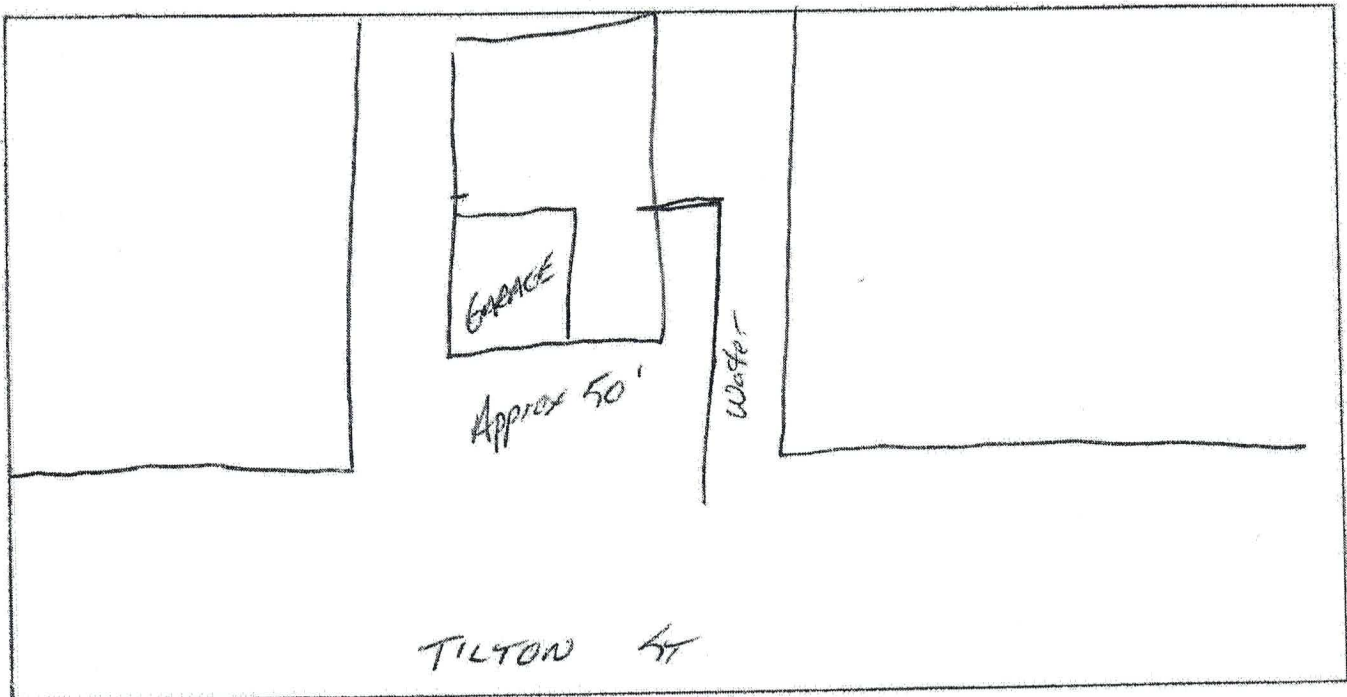
Phone: (603) 474-9921 Fax: (603) 474-3399

**WATER SERVICE APPLICATION**

**Service Connection Ties**

Address: 193 Tilton St. Seabrook, NH

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

11/25/24

\_\_\_\_\_  
Date

AMOUNT PAID: \$3586.50

CASH/CHECK # .137

DATE RECEIVED: 12-10-24

MS