

TOWN OF SEABROOK
SEWER DEPARTMENT &
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: 3-18-2025

APPLICANT / BUSINESS NAME Philip Franciosa
SERVICE ADDRESS 35 A Brooks Rd Ext
MAP 10 LOT 55 SEQ. 6 ZONING DISTRICT 6 R Is Lot in Current Use? Y ☒ N
MAILING ADDRESS 225 Lower Collins St CITY Seabrook STATE NH ZIP 03874
PHONE 978-270-6826 CELL Same EMAIL pfranciosa27@gmail.com
PROPERTY OWNER (IF DIFFERENT THAN ABOVE) Estate of Edm F Adams PHONE 603-926-6336

TYPE OF CONSTRUCTION (CHECK ALL THAT APPLY):

NEW CONSTRUCTION ☒ RESIDENTIAL SINGLE-FAMILY _____ RESIDENTIAL MULTI-FAMILY _____
CONDO ☒ MOBILE/MANUFACTURED HOME _____ COMMERCIAL _____ INDUSTRIAL _____
OTHER (PLEASE DESCRIBE): _____

BUILDING SIZE (IN SQUARE FEET) 1850 +/-

COMMENTS (IF APPLICABLE PLEASE LIST NO. OF BUILDINGS AND NO. OF UNITS):

1 Duplex Building with 2 units

FIXTURE COUNT

BATHROOM		KITCHEN		LAUNDRY		MISC	
SHOWER/TUB COMBO	<u>2</u>	SINKS	<u>3</u>	WASHING MACHINE	<u>1</u>	HOSEBIBS	<u>2</u>
BATHTUB		TOILETS	<u>3</u>	SINKS	<u>1</u>	BAR SINKS	
SHOWER		URINALS		OTHER		POOL (SIZE)	
OVERSIZED BATHTUB (EX: JACUZZI, SOAKER)		BIDET					

PROPERTY OWNER SIGNATURE

Amy McLaughlin

DATE: 3-18-2025

APPLICANT / CORPORATION OFFICER SIGNATURE

[Signature]

DATE: 3-18-2025

CORPORATION NAME:

OFFICERS NAME & TITLE (print)

I, Amy McLaughlin agree that I will not hold the Seabrook Sewer Department responsible for any damages to my property, which may be incurred during, or as a result of the sewer service installation.

Amy McLaughlin
Property Owner or Agent with Power of Attorney (Signature)

total for A

AMOUNT PAID 1900.50 CASH / CHECK # 2013 DATE RECEIVED 3/10/25 BY Judy

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House Service Connection Ties

Address: 35 Brooks Rd Ext Unit A

Map: 10

Lot: 55

Seq: 6

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 water lines on the property:

*APPROXIMATE LENGTH
45'

Brooks ROAD EXTENSION

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. The Town of Seabrook shall inspect and certify the plumbing, including the underground piping (before backfilling), prior to connection to the Town of Seabrook's sewer system.

--OFFICE USE ONLY--

GRANTED _____ DENIED _____ DATE _____

Board of Sewer Commissioners

REASON FOR DENIAL: _____

(CHAIRMAN)

[Signature]
Sewer Superintendent

3/11/25

Date

AMOUNT PAID 1900.50 CASH / CHECK # 2013 DATE RECEIVED 3/10/25 BY Judy

received 3/10/25