(A

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 LA	ANDOWNER? YES NO		DATE: L	1412	025		
APPLICANT NAME/CORPORATION			LANDOWNER/BILLING NAME				
MICHUL CH APPLICANTADDRESS 71 CENTER	HOME/V	VORKPHONE	BILLING ADDRI	:SS	en i i s mhaisan naoidealaidh ar is asaic i neachailleach dhaith an iaice mhairean	HOMBWORK PHONE	
CITYISTATE SEABNOOK N	ZIP CODE WORKS	THER PHONE		nazing hann wag i go animan ng mga man mana ng hang pariga	ZIP C O DI	WORK/OTHERPHONE	
E-MAIL ADDRESS OF APPLICA			E-MAIL ADDRE	SS OF LANDOWNE	R		
SERVICE ADDRESS:	71 CENTENN	1/AL 57		ASSESSO	R'S MAP-LOT-SEQ:		
MOBILE/MANUFACTURED	HOME COMMERCIAL 1	NSTRUCTION NDUSTRIAL	(Phase Das	cribe)	SANAGO		
-UNDER A	DDITIONAL COMMENTS' SECTION,	LIST NO. OF BU	JILDINGS AND NO	OF UNITS IN EAC	Control Contro	WALK WILL	
NO. OF STORIES IN BUILDING	E 2 BUILDING SIZE		********************************		L AREA IN SQUARE		
FIRE DEPARTMENT REQUIRED FIRE HYDRANTS REQUIRED IS THERE A WELL ON THE PR WILL A PUMP BE USED TO BO WILL THERE BE LANDSCAPE	MENTS NONE NONE ROPERTY? YES DOST PRESSURE? YES - FIRE S	SPRINKLE A PUBLIC (NO NO) SERVICE	-Lylled	SPRINKLE GARAG USING RECYC SERVICE	E ONLY PRIVATE (NO. OF H' LED WATER? NO.	***************************************	
FLOW OF EACH SPRINKLER H	1,000	The state of the s		TED AREA IN SQU	-		
IF NON-RESIDENTIAL, DESC	RIBE BUSINESS TYPE OR USAGE C	F LOT:			***************************************	***************************************	
	SER	VICES - LIST AL	L 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	T COUNT - COMPL	ETE THE QUANTITY O	F THE FOLLOWING			
TUBS/SHOWERS TUBS ONLY SHOWERS ONLY SINKS	HROOM: JACUZZITUBS OIS TOILETS (URINALS BIDETS	KITCHE HWASHERS SINKS		ES WASHERS SINKS # OF BEDROOMS:		MISCIOTHER: HOSEBIBS BAR SINKS SIZE: DESCRIBE:	
LAND OWNER'S SIGNATURE	Mr	1			e se constitución manera esta constitución de la co	DATE 4/4/202	
	hold the Soabrook Water Department re: ICATION WILL EXPIRE 2 YEARS AF						
CORPORATION NAME		OFF	ICER'S NAME & T	ITLE (PRINT)			
APPLICANT/CORPORATION'S	OFFICER SIGNATURE		underfrager mangane montait ni métansus		37	DATE	



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Service Connection Ties

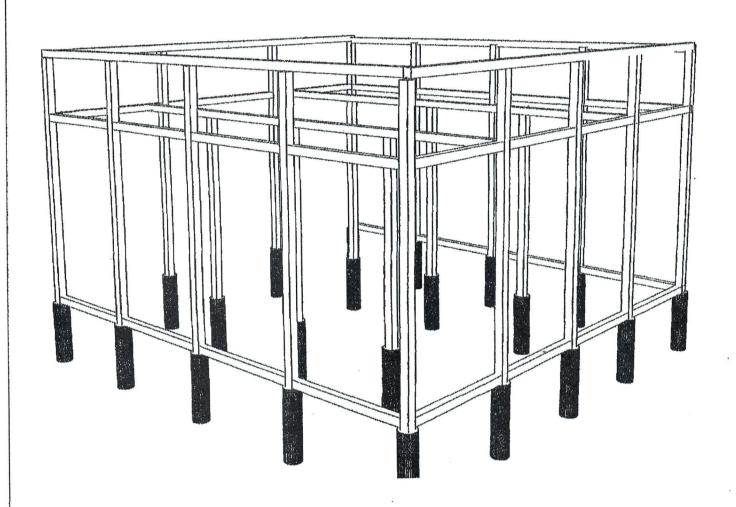
Address:	71 CGNTENNIA	ST	SCABHOOK	NH 0787	<u>'U</u>		
Please ; and a si	provide a sketch of the service connect ketch of the house. In addition, please tupew const	show the appr	proximate length. Please in eximate distances from an attach a copy of plans*	ndicate the name of the st y sewer lines on the prope	reet orty.		
BULGAIAN BRILUG	South Lange Collections of Lange Long Collec	DVIVO DVIVO	CGATOAN CGATOAN	win Y 5T			
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-							
GRA	ANTED DENIED DATE	······································	Board of Wate	r Commissioners			
REAS	SON FOR DENIAL:		(Chairman)				
			(Chuirinan)				
8	All 4/8/2.	5					
Water Su	perintendent	Date					

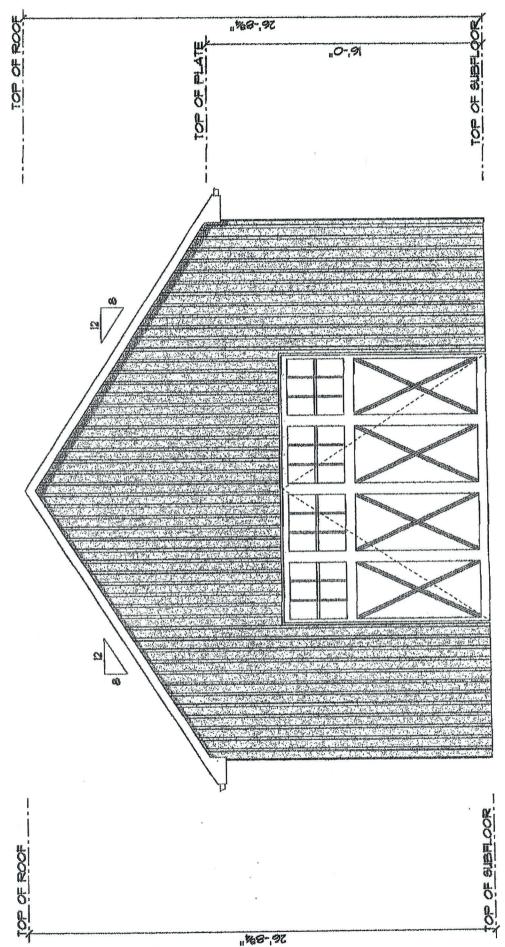
CASH/CHECK# COO

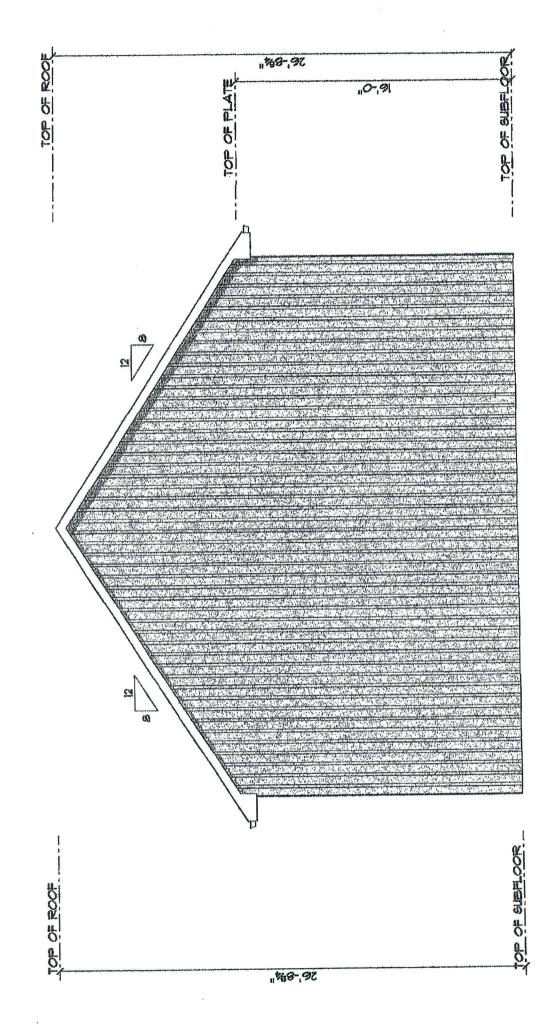
OU

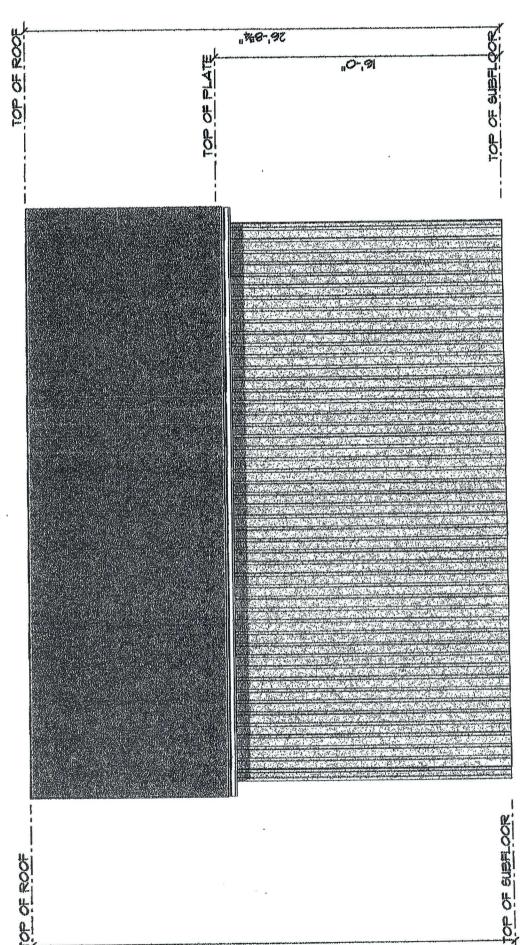
AMOUNT PAID 100

DATE RECEIVED 4 8 25









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