



# TOWN OF SEABROOK PUBLIC WATER SYSTEM

550 Route 107 ~ PO Box 450, Seabrook, NH 03074

Phone: (603) 474-0921 Fax: (603) 474-3399

## WATER SERVICE APPLICATION

APPLICANT INFO SAME AS LANDOWNER? ☒ YES ☐ NO DATE 3/21/20

APPLICANT NAME/CORPORATION Wojcik Development LANDOWNER/BILLING NAME \_\_\_\_\_

APPLICANT ADDRESS 110 Main St HOME/WORK PHONE \_\_\_\_\_ BILLING ADDRESS \_\_\_\_\_ HOME/WORK PHONE \_\_\_\_\_

CITY/STATE Seabrook NH ZIP CODE 03074 WORK/OTHER PHONE \_\_\_\_\_ CITY/STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_ WORK/OTHER PHONE \_\_\_\_\_

E-MAIL ADDRESS OF APPLICANT seana.wojck@wojckdevelopment.com E-MAIL ADDRESS OF LANDOWNER \_\_\_\_\_

SERVICE ADDRESS 84 B. Blacksnake Rd ASSessor's MAP LOT SECT 3-5-10

TYPE OF CONSTRUCTION (Check all that apply) ☒ NEW CONSTRUCTION ☐ RESIDENTIAL ☐ SINGLE FAMILY ☐ MULTI-FAMILY ☐ CONDO

MOBILE/MANUFACTURED HOME ☐ COMMERCIAL ☐ INDUSTRIAL ☐ (Please Describe) 1 Bldg 2 units (new line)

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

NO. OF STORIES IN BUILDING 2 BUILDING SIZE IN SQUARE FEET 2067 TOTAL PARCEL AREA IN SQUARE FEET 108,900

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 \_\_\_\_\_

FLOW OF EACH SPRINKLER HEAD IN GPM: \_\_\_\_\_ TOTAL IRRIGATED AREA IN SQUARE FEET: \_\_\_\_\_

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 <u>2</u> | JACUZZI TUBS _____ | DISHWASHERS <u>1</u> | CLOTHES WASHERS <u>1</u> | HOSEDIOS _____          |                    |             |  |
| TUBS ONLY _____       | TOILETS <u>3</u>   | SINKS <u>1</u>       | SINKS _____              | BAR SINKS _____         |                    |             |  |
| SHOWERS ONLY _____    | URINALS _____      |                      |                          |                         |                    |             |  |
| SINKS <u>3</u>        | BIDETS _____       |                      |                          | # OF BEDROOMS: <u>3</u> | POOL (SIZE: _____) |             |  |
|                       |                    |                      |                          |                         | DESCRIBE: _____    |             |  |

LAND OWNER'S SIGNATURE Mark Wojcik DATE 3/21/20

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 Wojcik Development OFFICER'S NAME & TITLE (PRINT) Mark Wojcik

APPLICANT/CORPORATION'S OFFICER SIGNATURE Mark Wojcik DATE 3/21/20

ACCOUNT No account yet

127925



# 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:

84 B Blacksnake Rd Right Side

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.

"If new construction, please attach a copy of plans"

See attached Plan

### 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)

*[Signature]* 4/7/25  
Water Superintendent

Date

AMOUNT PAID: 3,586.50

CASHION BROK # 4885

DATE RECEIVED

4/4/25

BY

*[Signature]*

84B

CHAINLINK FENCE

WETLAND BUFFER

W10

W15

W20

W25

W30

W35

W40

W45

W50

W55

W60

W65

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