# 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

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APPLICATION FOR SEWER SERVICE DATE: $\frac{\zeta/2/25}{2}$	
APPLICANT/BUSINESS NAME 5/1/100 Real Estate Dev. LLC	
SERVICE ADDRESS L CCOSS Bruch	
MAP 2 J LOT 2 SEQ. ZONING DISTRICT IS LOT IN CURRENT USE? Y(N)	
Q = Q // Q 1/ (-1) = 1/11	
	1
PHONE 603 926-1400 CELL 619 803 2, EMAIL Oan) 6 the hampton	ì
PROPERTY OWNER (IF DIFFERENT THAN ABOVE) Paul Level Coll Mg PHONE	
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)	
COMMENTS (IF APPLICABLE PLEASE LIST NO. OF BUILDINGS AND NO. OF UNITS):  1105 54746456 Removed 6/3/25	
71105 5414C4G14 1Ct MODER 6/3/23	
FIXTURE COUNT	
BATHROOM KITCHEN LAUNDRY MISC  SHOWER/TUB COMBO SINKS SINKS WASHING MACHINE HOSEBIBS	
BATHTUB J TOILETS DISHWASHER SINKS — BAR SINKS	
SHOWER OTHER OTHER POOL (SIZE)	
OVERSIZED BATHTUB (EX: JACUZZI, SOAKER)  BIDET	
PROPERTY OWNER SIGNATURE OR VL L M3. C DATE: 6/2/25	
Applicant/Corporation Officer Signature Date:	
CORPORATION NAME:	
OFFICERS NAME & TITLE (print)	
I, Yan 1 Legel of Mg 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.	
Property Owner or Agent with Power of Antorney (Signature)	
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AMOUNT PAID \$60 CASH / CHECK # 1 C DATE RECEIVED W/ BY (\VV)	ı

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#### House Service Connection Ties

Address:	LIOUSC DOLVICE	Connection 1108	
Map:	Lot:	Seq:	
Please provide a sketch of the		oproximate length. Please indicate to oximate distances from any water li	
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	See	PLan	
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			-
The applicant shall provide pro	Connection to pper plumbing of building(s), which	ch shall be in compliance with the Inte	national Plumbing
and the State of New Hampshi	ode as well as the rules and ordina ire. The Town of Seabrook shall in	aspect and certify the plumbing, includ	ing the underground
piping (before	backfilling), prior to connection	to the Town of Seabrook's sewer syste.	m.
	Office Us	E ONLY-	Commissioners
GRANTED	DENIED DATE	Dyma of Sensi	<b>Commissioners</b>
REASÓN FOR DENIAL:		(CHAIR	MAN)
Bell	6/4/20		ula, mahalimman mananan
Sewer Superintendent	Date		<u></u>
Maria de la Companya		the state of the s	

DATE RECEIVED

BY

CASH / CHECK#

AMOUNT PAID