

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: 06/30/2025

APPLICANT / BUSINESS NAME CELESTIAL BANQUET & EVENTS CENTER
UNIT-102
SERVICE ADDRESS 920 LAFAYETTE ROAD, SEABROOK NH 03874
MAP 7-91-102 LOT UNIT-102 SEQ. _____ ZONING DISTRICT _____ IS LOT IN CURRENT USE? Y/N
MAILING ADDRESS 920 LAFAYETTE ROAD CITY SEABROOK STATE NH ZIP 03874
PHONE 603 205 3176 CELL _____ EMAIL diluvp5@gmail.com
PROPERTY OWNER (IF DIFFERENT THAN ABOVE) JAY CHANESH LLC PHONE 603 205 3176

TYPE OF CONSTRUCTION (CHECK ALL THAT APPLY):

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

BUILDING SIZE (IN SQUARE FEET) 7600

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

FIXTURE COUNT

BATHROOM		KITCHEN		LAUNDRY		MISC	
SHOWER/TUB COMBO	<input type="checkbox"/>	SINKS	<u>3</u>	SINKS	<u>1</u>	WASHING MACHINE	<input type="checkbox"/>
BATHTUB	<input type="checkbox"/>	TOILETS	<u>4</u>	DISHWASHER	<u>1</u>	SINKS	<input type="checkbox"/>
SHOWER	<input type="checkbox"/>	URINALS	<u>1</u>	OTHER	<input type="checkbox"/>	OTHER	<input type="checkbox"/>
OVERSIZED BATHTUB (EX: JACUZZI, SOAKER)	<input type="checkbox"/>	BIDET	<input type="checkbox"/>			POOL (SIZE)	<input type="checkbox"/>

PROPERTY OWNER SIGNATURE Patel - P DATE: 06/30/25
APPLICANT / CORPORATION OFFICER SIGNATURE Patel - P DATE: 06/30/25
CORPORATION NAME: JAY CHANESH LLC
OFFICERS NAME & TITLE (print) Tushar Kumar Patel LLC Member

I, Tushar Kumar Patel agree that I will not hold the Seabrook Sewer Department
Property Owner (print)
responsible for any damages to my property, which may be incurred during, or as a result of the sewer service
installation.

Patel - P
Property Owner or Agent with Power of Attorney (Signature)

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**House Service Connection Ties**Address: 920 Lafayette Rd, Unit 102, Seabrook, NH-03874Map: 7-91-102

Lot: _____

Seq: _____

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:

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) _____

Sewer Superintendent7/9/25
DateAmount Paid \$100.00 . Cash/Check# 1118 Date 7/9/25 By Judy

1923-24

JAY GANESH LLC
705 OSSIPEE TRL W
STANDISH, ME 04084

1118

52-7438/2112

7/8/25

Date

CHECK ARMOR

Pay to the
Order of

Town of Seabrook

\$ 100.00

one hundred

X

Dollars



Photo
Safe
Deposit
Data on back



Biddeford Savings

For

Sewer Permit - Celestial Banquet

to hotel

NP

⑆ 211274395⑆ 80⑈ 826⑈ 338⑈ 1118

Printed Name

INTOUCH • CUSTOM CREATIONS