



TOWN OF SEABROOK PUBLIC WATER SYSTEM

550 Route 107 ~ PO Box 458, Seabrook, NH 03874

Phone: (603) 474-9921 Fax: (603) 474-3399

WATER SERVICE APPLICATION

APPLICANT INFO SAME AS LANDOWNER? ☒ YES ☐ NO

DATE 8-21-25

APPLICANT NAME/CORPORATION Spednik LLC

LANDOWNER/BILLING NAME

APPLICANT ADDRESS 48 Blacksnake Rd.

HOME/WORK PHONE 603 397 7570

BILLING ADDRESS

HOME/WORK PHONE

CITY/STATE Seabrook NH

ZIP CODE 03874

WORK/OTHER PHONE

CITY/STATE

ZIP CODE

WORK/OTHER PHONE

E-MAIL ADDRESS OF APPLICANT SpednikLLC@gmail.com

E-MAIL ADDRESS OF LANDOWNER

SERVICE ADDRESS: 24 Adder Lane

ASSESSOR'S MAP LOT-SEQ.

TYPE OF CONSTRUCTION (Check All That Apply)

NEW CONSTRUCTION ☒

RESIDENTIAL

SINGLE FAMILY

MULTI-FAMILY

CONDO

☒ MOBILE/MANUFACTURED HOME

COMMERCIAL

INDUSTRIAL

(Please Describe)

New manufactured home install

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

NO. OF STORIES IN BUILDING: 1

BUILDING SIZE IN SQUARE FEET: 1500

TOTAL PARCEL AREA IN SQUARE FEET: 7500

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	1	JACUZZI TUBS		DISHWASHERS	1	CLOTHES WASHERS	1	HOSE BIBS	
TUBS ONLY		TOILETS	2	SINKS	1	SINKS		BAR SINKS	
SHOWERS ONLY	1	URINALS				# OF BEDROOMS:		POOL (SIZE: _____)	
SINKS	3	BIDETS					3	DESCRIBE:	

Demolishing home that is currently on property as of 4-4-25 and installing new manufactured home in September 2025.

LAND OWNER'S SIGNATURE [Signature]

DATE 8-21-25

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 Spednik LLC

OFFICER'S NAME & TITLE (PRINT) Stephen Lago, Manager

APPLICANT/CORPORATION'S OFFICER SIGNATURE [Signature]

DATE 8-21-25

ACCOUNT # 200014



TOWN OF SEABROOK PUBLIC WATER SYSTEM

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Phone: (603) 474-9921 Fax: (603) 474-3399

WATER SERVICE APPLICATION

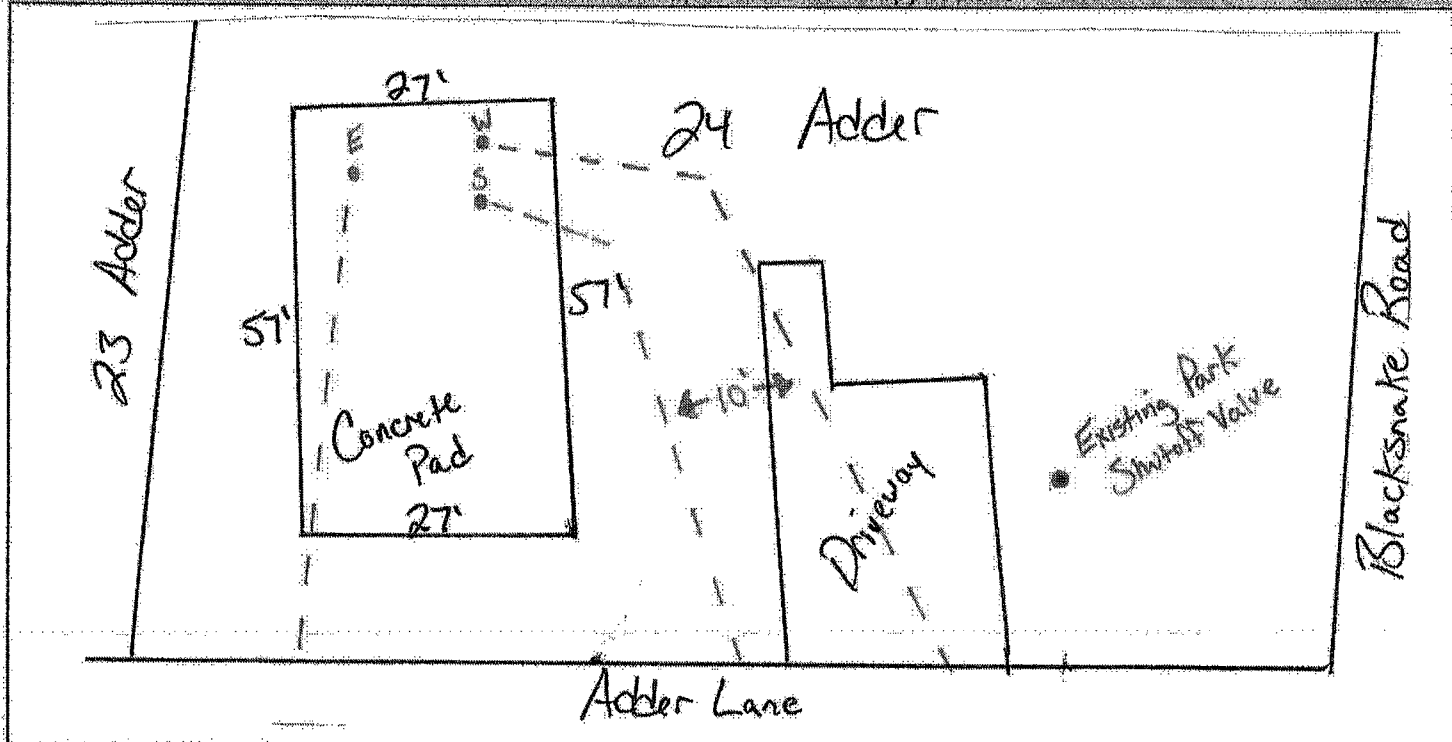
Service Connection Ties

Address

24 Adder Lane

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"



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]
Water Superintendent

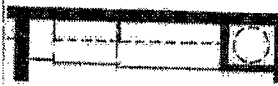
8/25/25
Date

AMOUNT PAID \$100

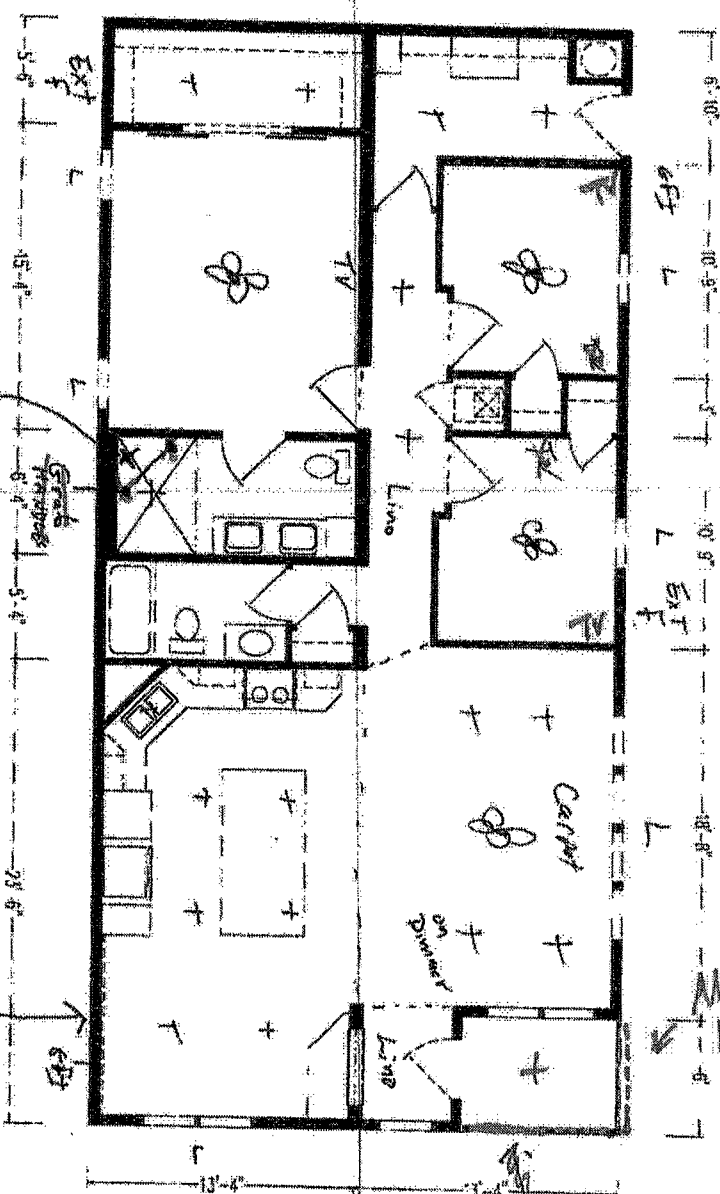
CASH/CHECK # 9325

DATE RECEIVED 8-21-25

BY *ms*



OPT FROM COND
RESERVATION W/ASST. FILE



Slide bar
Hand held
w/ Rain Cap

Add → X = 0

*Sign *[Signature]* 12th 4-2-25

DIVISIONS			
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