

NORTHEASTERN YORK COUNTY SEWER AUTHORITY

200 NORTH MAIN STREET PO BOX 516

MOUNT WOLF, PA 17347-0516

PHONE NUMBER: 717-266-1493

SEWER CONNECTION PERMIT APPLICATION

This Section To be Completed by Sewer Authority		Permit #	
Application	<input type="radio"/> Approved <input type="radio"/> Denied	Date:	
Sewer District#:			
Connection Charge:			
Inspection Fees:			
Other Fees:			
Total Due:		Check #	
Signature of Permit Officer:			
PERMITS EXPIRE 2 YEARS FROM DATE OF ISSUANCE			

Select a Permit Type	
<input type="radio"/> Sanitary Sewer Connection Type: <input type="radio"/> Residential <input type="radio"/> Commercial <input type="radio"/> Industrial*	
<input type="radio"/> Grinder Pump** <input type="radio"/> Grease Trap/Oil Interceptor***	
# of EDUs:	
<small>*If Industrial is selected, an Industrial Wastewater Discharge Permit Application must accompany this Connection Permit Application **If grinder pump is selected, the grinder pump design calculations must be submitted for review prior to permit approval/issuance. ***If grease trap/oil Interceptor is selected, the grease trap design needs to be submitted for review prior to approval/issuance.</small>	

Project Site Information			
Property Address:		UPI/Tax Map & Parcel #	

Property Owner Information	
Name: <small>(First, Last)</small>	Phone #
Full Address: <small>(House #, Street, City, State, Zip)</small>	
Property Owner's Email Address	
Property Owner's Signature	<div style="display: flex; justify-content: space-around; margin-top: 10px;"> <div style="border-top: 1px solid black; width: 40%;"></div> <div style="border-top: 1px solid black; width: 40%;"></div> </div> <div style="display: flex; justify-content: space-around; margin-top: 5px;"> Signature Date </div>

Project Details and Scope of Work

Description of Work

A sewer cleanout shall be installed in accordance with the Authority's Rules & Regulations, including when a lateral is repaired or replaced and there had been no cleanout installed previously. Please refer to FAQs and drawing. Cleanouts and caps are to be maintained by the property owner to prevent storm water from entering the sewer system. Downspouts, sump pumps, basement floor drains are NOT allowed to be connected to the sewer system.

Certification

By signing this certification, I am certifying that I am the owner of the named property, or that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make applications as his authorized agent. I understand that I will conform to all applicable laws of this jurisdiction.

Applicant's Signature:

Date:

Applicant's Email:

Ph. #

Applicant's Full
Address:**Contractor Information**

Name of Contractor:

Ph. #

Person in Charge of
Work:

Ph. #

Contractor Full
Address:

Email Address:

Master Plumber's Information

Full Name:

Plumbing License #

Municipality of License:

Address:

Office Ph. #:

Cell Ph. #

Email Address: