



**TOWN OF OXFORD**  
**APPLICATION FOR PERMIT**  
 TO CONSTRUCT AND/OR CONNECT A PRIVATE SEWER TO THE PUBLIC SEWER  
**FOR RESIDENTIAL OR COMMERCIAL SERVICE**

**PERMIT #**

**SEDC**

<b>S I T E</b>	PROPERTY LOCATION					
	MAP/PARCEL					
<b>O W N E R</b>	OWNER					
	ADDRESS					
<b>P R O J E C T</b>	RESIDENTIAL		NUMBERS OF FAMILY UNITS			NUMBER OF BEDROOMS
	COMMERCIAL		TYPE OF BUSINESS			
	<b>LIST OF ALL FIXTURES TO BE CONNECTED TO PROPOSED BUILDING SEWER:</b>					
	SINKS - TUBS - LAVATORIES		URINALS		GARBAGE GRINDERS	
	TOILETS		SHOWERS		OTHER:	
<b>I N F O R M A T I O N</b>	EST. TOTAL FLOW					
	MAXIMUM NUMBER OF PERSONS WHO WILL USE ABOVE FIXTURES					
	I HAVE CONTRACTED				LICENSE NUMBER	
	NAME OF DRAINLAYER					
	TO COMPLETE THIS WORK AND AUTHORIZE THIS APPLICATION IN MY NAME BY SAID DRAINLAYER. I AGREE TO COMPLY WITH ALL LAWFUL REGULATIONS, PRESENT AND FUTURE, FOR USE OF THE PUBLIC SEWERS:					
	See attached					
	(SIGNATURE OF OWNER)	(DATE)	(SIGNATURE OF DRAINLAYER)	(DATE)		
<b>*</b>	<b>ATTACH PLAN &amp; PROFILE FOR PROPOSED CONSTRUCTION</b>					
<b>O F F I C E</b>	FEE	\$ 375.00	RECEIVED PAYMENT <b>X</b>	\$	BY	
	PERMIT GRANTED – SUBJECT TO THE FOLLOWING RESTRICTION – <b>PER DEPARTMENT REGULATIONS</b>					
	TOTAL LENGTH & SIZE OF PIPE TO BE INSTALLED		LENGTH	SIZE	SUPERINTENDENT OF SEWER (DATE)	
<b>I N S P E C T O R</b>	<b>THIS PERMIT MUST BE AVAILABLE AT JOB SITE AT ALL TIMES</b>					
	<b>IT MUST BE RETURNED WITHIN 60 DAYS OF DATE AND IS VOID THEREAFTER</b>					
	WORK INSPECTED AND DISAPPROVED			DATE		
	REASON:					
	WORK INSPECTED AND APPROVED			DATE		
	ADD'L FEE	PAID	DATE			
DIGSAFE #						
<b>F I N A L</b>	<b>I CERTIFY THAT THIS WORK HAS BEEN COMPLETED BY ME AS SHOWN ON ATTACHED PLAN AND IN ACCORDANCE WITH ALL APPLICABLE REGULATIONS</b>					
	SIGNATURE OF DRAINLAYER				(DATE)	