## **UPPER ALLEN TOWNSHIP**

100 Gettysburg Pike Mechanicsburg, PA 17055-5698 (717) 766-0756

## APPLICATION FOR PERMIT TO CONNECT TO THE SANITARY SEWER

Property Owner:		Parcel No.: 42-  Lot No.:	
Property Address:			
Owner's Address (if different):			
Telephone No.:	Type of System t	o be Installed: Gravity	Pressure
Type of Building to be Served: Resi	dential Commercial	☐ Industrial	Other
Description if other than Single Family Res	idential	IBC Use Group:	
Occupancy Load if other than Residential:			
Number of Equivalent Dwelling Units (EDU			
	rial Use Include Sewer Use Perm		
Construction to be Performed By:	Contractor Expected to be En	nployed:	
☐ Self ☐ Contractor			
	Name		
	Address	Telephone Number	<u> </u>
I UNDERSTAND THAT A PRE-CONS' TOWNSHIP TO INSURE THAT PLUME UNIFORM CONSTRUCTION CODE. PROPERLY TRAPPED AND VENTED, I PIPE WITH VENT IN CONJUNCTION W	SING CONFORMS TO THE IN I FURTHER UNDERSTAND WILL BE REQUIRED TO INS	TERNATIONAL PLUMBING THAT IF INTERNAL PL FALL AN EXTERNAL TRAP	CODE AND THE UMBING IS NOT
	FOR TOWNSHIP USE ON	ILY	
TAPPING FEE-DATE OF PAYMENT BY	\$ CASH	CHECK NO DA	TE
INSPECTION FEE-DATE OF PAYMENT	BY \$ CASH	CHECK NO DA	TE
PRE-CONSTRUCTION INTERNAL BUIL	LDING INSPECTION PERFOR	MED NO YES	
TRAP/AIR INTAKE VENT REQUIRED	$\square$ NO $\square$ YES		
INSPECTED	BY		
AS AN APPLICANT FOR A PERMIT SYSTEM, I HEREBY ACKNOWLED REGULATIONS ADOPTED BY UPPER A LATERAL, PRESSURE LATERAL OR GBY MYSELF OR MY CONTRACTOR SH	GE AWARENESS OF THE ALLEN TOWNSHIP AND CERT RINDER PUMP THAT IS TO B	REQUIREMENTS OF TI TIFY THAT THE BUILDING E INSTALLED UNDER THIS	HE RULES AND SEWER, SERVICE
EXCEPTIONS [ (If checked, see comm	nents)		
APPLICANT	APPLIC	ANT(Signature)	
(Printed Name)	DATE	(Signature)	
UPON ISSUING THE SEWER CONNEC BUILDING SEWER, SERVICE LATERA UPPER ALLEN TOWNSHIP FOR A FINA	TION PERMIT, THE APPLICAL, PRESSURE LATERAL, O	R GRINDER PUMP. YOU	<b>MUST CONTACT</b>
COMMENTS:			
PERMIT ISSUED:  Date	Permit #		

 $Z \land Sewer \land Administration \land Sewer \ Dept. \ Secretary \land FORMS \land Application \ to \ Connect \ to \ Sanitary \ Sewer \ - \ Revised \ 10-15-13. doc$