



Faxed to P.W. ☐ Date: _____

APPLICATION FOR WATER AND SANITARY SEWER CONNECTION PERMIT
STREETLINE TO BUILDING ONLY

Date: _____

| | | |
|---|-------------------|--------------------------------|
| Cash Receipt: _____ | Permit Fee: _____ | Application Received By: _____ |
| Assessment Roll No.: <input type="checkbox"/> or Assigned Roll No.: <input type="checkbox"/> 3310 - _____ | | |

Circle Location:

Courtland Delhi Port Dover Port Rowan Simcoe Waterford St. Williams

Street Address: _____ Lot: _____ Block: _____ Reg. Pl. _____

Reference Plan No.: _____ Part No.: _____ Severance: _____

New Subdivision ☐ Site Plan Control ☐ Model Home ☐

Circle Type of Building:

Residential Semi-Detached Street Townhouse Condominium & Linked Townhouses

Industrial Commercial

Number of Units: Residential _____ Commercial _____

Applicant to Complete:

Diameter of Water _____ **Type:** New ☐ Replacement ☐ **Building:** New ☐ Existing ☐

* For New Water Services Only – Received Meter Package YES / NO Initials _____

Diameter of Sewer _____ **Type:** New ☐ Replacement ☐ **Building:** New ☐ Existing ☐

Diameter of

Foundation Drain _____ **Type:** New ☐ Replacement ☐ **Building:** New ☐ Existing ☐

CONTRACTOR/SERVICE INSTALLER SEWER BONDED WITH NORFOLK COUNTY – YES / NO

Name: _____ Address: _____

Town: _____ Postal Code: _____ Telephone: _____ Facsimile: _____

OWNER'S NAME **or** BUILDING CONTRACTOR

Name: _____ Address: _____

Town: _____ Postal Code: _____ Telephone: _____ Facsimile: _____

Applicant Name: _____

Applicant Signature: _____

Fax application to Deanna Anderson @ 582-4571, Phone: 582-2100 ext.1205 or 428-0020 ext. 1205

*If Connection is **NOT** Streetline to Building, Applicant **MUST** contact the Delhi Public Works & Environmental Services Office.
Authorization Permit Number will be faxed to Building Inspector. Copy of Water & Sewer Permit will be sent to Contractor/Service Installer.*