



**CITY OF WOONSOCKET, RHODE ISLAND**  
**DEPARTMENT OF PUBLIC WORKS**  
**ENGINEERING DIVISION**

**APPLICATION FOR A SEWER CONNECTION**

Sewer Permit No. \_\_\_\_\_

TO THE DIRECTOR OF PUBLIC WORKS:

The undersigned, owner of the estate at No. \_\_\_\_\_, hereby makes application for permission to connect said estate with public sewer in \_\_\_\_\_.

The undersigned agrees to strictly conform to all existing ordinances, rules and regulations, and to all ordinances, rules and regulations relating to the use of the public sewers and the making and using of all connections with said sewers, which may hereafter be enacted by the City Council or by the Director and approved by the City Council.

The undersigned further agrees that no claim for damages that may be occasioned to said estate or any property thereon in any manner by the construction, existence or use of said connection shall be made against the City of Woonsocket, Rhode Island.

The undersigned further agrees that the Director shall have access at all reasonable hours to the premises to see that all ordinances, rules and regulations relating to the public sewers and all connections therewith are being complied with.

All connections shall be of such size and material, and laid to such grade and depth as the Director may determine.

All work of making connections shall be under the supervision of the Director.

All repair work to the public right-of-way, necessitated by this excavation, shall be the sole responsibility of the homeowner. The actual cost of the repair will be billed to the homeowner. The actual cost of the repair will be billed to the homeowner through the plumber to whom the excavation permit was issued.

**USER CLASSIFICATION**

(To be completed by Applicant)

(Check appropriate item(s))

Residential – No. of Dwelling Units \_\_\_\_\_

Commercial \_\_\_\_\_

Industrial\* \_\_\_\_\_

Miscellaneous; explain \_\_\_\_\_

\_\_\_\_\_  
(Signature of Owner)

\_\_\_\_\_  
Date

\_\_\_\_\_  
(Signature of Drain Layer  
or Master Plumber)

\_\_\_\_\_  
Date

\_\_\_\_\_  
(Insurance Certificate No. & Date)

Sewer Connection Fee Paid: \$ \_\_\_\_\_ Date: \_\_\_\_\_ Not Applicable: \_\_\_\_\_  
(Property Owner) (Amount) (Explain)

Sewer Permit Fee Paid: \$ \_\_\_\_\_ Date: \_\_\_\_\_ Sewer Permit Issue Date: \_\_\_\_\_  
(Amount) Return Date: \_\_\_\_\_

\*If industrial application is made, Owner must provide the following to the Director on the reverse side application.

### ASSURANCES

To be certified by a Registered Professional Sanitary Engineer:

Description of industrial sewage characteristics proposed to be discharged:

Max. BOD \_\_\_\_\_ mg/l (not to exceed 250 mg/l)

Max. SS \_\_\_\_\_ mg/l (not to exceed 30 mg/l)

Max. Flow \_\_\_\_\_ gal/day

Avg. Flow \_\_\_\_\_ gal/day

If parameters exceed design, what pretreatment measures will be taken?

If reserve capacity needed at the treatment plant in the future?

\_\_\_\_\_ Yes          \_\_\_\_\_ No

Is sewage treatable by conventional biological treatment process?

\_\_\_\_\_ Yes          \_\_\_\_\_ No

If no, please explain.

\_\_\_\_\_  
(Stamp)

\_\_\_\_\_  
(Signature) P.E.