

**Derry Township Municipal Authority
Application for Building Sewer Connection Permit**

INSTRUCTIONS: This top portion of this application must be completed by the applicant and submitted to DTMA. Please allow up to three (3) business days for the Permit to be executed by DTMA.

Service Address: _____ Date: _____

City: _____ State: _____ Zip _____

Owner: _____

Builder: _____

Owner/Builder Address: _____

Contact Name: _____ Contact Phone No.: _____

Contact E-Mail Address: _____

Development Name: _____ Parcel No, if known: _____

Water Supply: _____ Private _____ Public Water Co. Name: _____

Permit Type: _____ New Connection _____ Repair _____ Reconnect _____ Demo

Other: _____

Type of Connections: _____ Residential _____ Commercial _____ Industrial

Description of Non-Residential: _____

Municipality: _____

Plumber Performing Work: _____

The undersigned hereby represents that, to the best of their knowledge, all information listed above is true, correct, and complete.

The Applicant, by completing this application, agrees to pay all Inspection, Capital Fees and cost incurred by DTMA's Engineers and Solicitor in relation to the application, plans, and legal documents relative to this permit.

The undersigned agrees to abide by the Rates, Rules, and Regulations of the Derry Township Municipal Authority and certifies that the building sewer to be installed under this permit shall conform thereto.

Date: _____ Signature: _____

TO BE COMPLETED BY DTMA

Permit No.: _____ Non-Residential GPD: _____

Subdivision: _____ Amount of Payment: _____

Grinder Pump Needed: _____ No _____ Yes Agreement Dated: _____

