

**TOWN OF HAMBURG
SEWER PERMIT APPLICATION**

DATE OF APPLICATION: _____

TOWN PERMIT NO. _____

COUNTY PERMIT NO. _____

_____ DISTRICT #2

_____ DISTRICT #3

_____ REPAIR/REPLACEMENT

NAME OF BUILDER/OWNER: _____

PROPERTY ADDRESS: _____

UNIT NO.: _____

ALL WORK PERFORMED MUST BE DONE IN ACCORDANCE WITH THE APPLICABLE CODES AND REGULATIONS DETERMINED BY THE ERIE COUNTY SEWER DISTRICT.

THE MASTER PLUMBER/SITE UTILITY CONTRACTOR RESPONSIBLE FOR SIGNING THIS PERMIT MUST BE ON LOCATION WHEN THE TAP OR REPAIR/REPLACEMENT IS BEING PERFORMED.

SIGNATURE OF MASTER PLUMBER/SITE UTILITY CONTRACTOR:

PRINT NAME _____

SIGNATURE OF BUILDING INSPECTOR _____

FEE: _____

TOWN CLERK SIGNATURE: _____

