

BOARD OF COMMISSIONERS

JERRY LANDSBERG
CHAIRMAN

STEVE REITER
SECRETARY

PATTY KATZ
TREASURER



236 EAST SHORE ROAD
GREAT NECK, NEW YORK 11023

TEL: (516) 482-0238

FAX: (516) 482-8713

WWW.GNWPCD.NET

**GREAT NECK
WATER POLLUTION CONTROL DISTRICT**

APPLICATION FOR SANITARY SERVICE CONNECTION
CHECK LIST

Check List:

- 1) Completely fill out the applicant information, site information and licensed plumber information.
- 2) Specify the type of work to be performed.
- 3) Indicate the permit type you are applying for. It can be single family, multi-family, two to four family dwelling or commercial building.
- 4) Provide check or money order for permit deposit for cost (see application for sanitary service connection for details).
- 5) Sketch proposed route of new sanitary service pipe on the "Proposed Sanitary Service Connection Sketch" provided with the application.
- 6) Indicate the following on the sketch:
 - Address
 - Name of licensed plumber
 - Date
 - Road name
 - Connection type
 - Pipe material
 - Depth of service pipe at house
 - Depth of service at connection
 - Pipe slope

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WATER POLLUTION CONTROL DISTRICT**

APPLICATION FOR SANITARY SERVICE CONNECTION

APPLICANT INFORMATION:

Applicant Name: _____

Company Name/Affiliation (if applicable): _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone: _____ Business Phone: _____ Fax: _____

SITE INFORMATION:

Site Address: _____

City: _____ Zip Code: _____ Town/Village: _____

Section: _____ Block: _____ Lots: _____

LICENSED PLUMBER INFORMATION:

Company Name: _____

Licensed Plumber's Name: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Business Phone: _____ Fax: _____ Contact: _____

License Number: _____ Issuing Number: _____

TYPE OF WORK TO BE PERFORMED:
(Please complete the attached proposed sanitary service connection sketch)

New Connection to Sewer Main New Connection to Existing Building Lateral

PERMIT DEPOSIT FOR COST:

\$750 - Single Family Dwelling \$1,500 - Two to Four-Family Dwelling

\$1,500 - Multi-Family Dwelling (5+ Units) \$1,500 - Commercial Building

A "deposit for cost" shall be included with the application for sanitary service connection. Upon acceptance of the sanitary service connection, any funds not utilized will be returned to the applicant. Should additional funds be required beyond the initial deposit, the applicant will be responsible. "Deposit for cost" is noted above.

PAYABLE BY CHECK OR MONEY ORDER TO: GREAT NECK WATER POLLUTION CONTROL DISTRICT

FOR DISTRICT USE ONLY

Connection
Deposit For Cost: _____ Check Number: _____ Check Date: _____

Application Received By: _____ Date: _____

GREAT NECK WATER POLLUTION CONTROL DISTRICT – GREAT NECK, NEW YORK

CONNECTION PERMIT ISSUED UPON ACCEPTANCE OF THIS APPLICATION WILL BE SUBJECT TO THE FOLLOWING CONDITIONS:

1. SUBMISSION OF AN ACCEPTABLE SKETCH (USE ATTACHED "PROPOSED SANITARY SERVICE CONNECTION SKETCH") OF THE PROPOSED BUILDING LATERAL CONNECTION.
2. THE INSTALLER SHALL ABIDE BY ALL PROVISIONS OF THE ORDINANCES, RULES AND REGULATIONS OF THE GREAT NECK WATER POLLUTION CONTROL DISTRICT.
3. THIS PERMIT SHALL NOT RELIEVE THE PERMITTEE OR INSTALLER FROM OBTAINING ANY ADDITIONAL PERMITS REQUIRED BY LAW, ORDINANCE, OR REGULATION OF NEW YORK STATE, NASSAU COUNTY, TOWN OF NORTH HEMPSTEAD OR INCORPORATED VILLAGE.
4. THE PERMITTEE SHALL MAINTAIN THE BUILDINGS SEWER LATERAL TO THE SEWER MAIN INCLUDING THE CONNECTION TO THE SEWER MAIN.
5. ALL WORK MUST BE PERFORMED IN THE PRESENCE OF A GREAT NECK WATER POLLUTION CONTROL DISTRICT REPRESENTATIVE AND NO WORK SHALL BE COVERED PRIOR TO INSPECTION AND ACCEPTANCE BY THE DISTRICT.
6. SHEETING AND SHORING IS REQUIRED ON ALL TRENCHES GREATER THAN 5 FEET IN DEPTH PER OSHA/REGULATORY REQUIREMENTS.
7. POINT OF CONNECTION SHALL BE DETERMINED BY THE GREAT NECK WATER POLLUTION CONTROL DISTRICT.
8. THE PERMITTEE SHALL NOTIFY THE GREAT NECK WATER POLLUTION CONTROL DISTRICT IMMEDIATELY IN THE EVENT OF ANY ACCIDENT, CHANGE OF CONDITIONS OR OTHER OCCURRENCE THAT OCCASIONS DISCHARGE TO THE STREET SEWER. FAILURE TO COMPLY WITH THIS CONDITION SHALL VOID THIS PERMIT.
9. CESSPOOLS, SEPTIC TANKS OR OVERFLOW POOLS ARE NOT ALLOWED TO BE PUMPED, DRAINED OR DISCHARGED INTO THE STREET SEWERS. ABANDONED CESSPOOLS, SEPTIC TANKS OR OVERFLOW POOLS ARE TO BE PUMPED OUT AND BACKFILLED WITH CLEAN FILL IN ACCORDANCE WITH NASSAU COUNTY HEALTH DEPARTMENT REQUIREMENTS.
10. PERMIT MUST BE KEPT ON THE PREMISES, POSTED CONSPICUOUSLY UP TO AND DURING THE DISCONNECTION.
11. PERMIT SHALL BECOME VOID IF CONNECTION IS NOT COMPLETED WITHIN THIRTY (30) DAYS FROM THE DATE OF ISSUANCE. NO REFUND WILL BE MADE FOR PERMITS ISSUED AND NOT USED WITHIN THE GIVEN TIME FRAME.
12. ALL INSPECTIONS MUST BE REQUESTED IN WRITING AND BE SCHEDULED WITH THE GREAT NECK WATER POLLUTION CONTROL DISTRICT NO LESS THAN FORTY-EIGHT (48) HOURS IN ADVANCE.
13. THE GREAT NECK WATER POLLUTION CONTROL DISTRICT MAKES NO WARRANTY WITH REGARD TO THE LOCATION OF THE BUILDING LATERAL OR POINT OF CONNECTION. THE LOCATION OF THE AFOREMENTIONED SHALL BE THE SOLE RESPONSIBILITY OF THE PERMITTEE.

THE OWNER OR LESSEE (PERMITTEE) AND THE LICENSED PLUMBER HAVE READ THE ABOVE CONDITIONS AND ALL OF THE RULES AND REGULATIONS OF THE GREAT NECK WATER POLLUTION CONTROL DISTRICT COMPLETELY AND THOROUGHLY. THESE CONDITIONS WILL GOVERN THE CONNECTION OF THE SANITARY BUILDING LATERAL BY THE PERMITTEE AND APPEAR ON THE FACE OF THE PERMIT WHEN ISSUED. THE PERMITTEE AND THE LICENSED PLUMBER WILL BE HELD LEGALLY RESPONSIBLE FOR THE ADHERENCE TO ALL OF THESE CONDITIONS, AND ALL ORDINANCES, RULES AND REGULATIONS OF THE GREAT NECK WATER POLLUTION CONTROL DISTRICT.

Name: _____ Date: _____

Signed: _____
Owner or Lessee

Address of Owner or Lessee _____ City of Owner or Lessee _____ State of Owner or Lessee _____ Zip Code of Owner or Lessee _____

State of New York }
County of _____ } ss.

On the _____ day of _____ in the year _____ before me, the
Day Month Year
undersigned, a Notary Public in and for said state, personally known to me or proved to me on the basis of satisfactory evidence to be the individual(s) whose name(s) is (are) subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their capacity(ies), and that by his/her/their signature(s) on the instrument, the individual(s), or the person upon behalf of which the individual(s) acted, executed the instrument.

Signature of Notary Public

Name: _____ Date: _____

Signed: _____
Licensed Plumber

Address of Licensed Plumber _____ City of Licensed Plumber _____ State of Licensed Plumber _____ Zip Code of Licensed Plumber _____

State of New York }
County of _____ } ss.

On the _____ day of _____ in the year _____ before me, the
Day Month Year
undersigned, a Notary Public in and for said state, personally known to me or proved to me on the basis of satisfactory evidence to be the individual(s) whose name(s) is (are) subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their capacity(ies), and that by his/her/their signature(s) on the instrument, the individual(s), or the person upon behalf of which the individual(s) acted, executed the instrument.

Signature of Notary Public

NAME (LICENSED PLUMBER): _____

DATE: _____

CONNECTION TYPE:
 CONNECTION TO EXISTING MAIN
 CONNECTION TO EXISTING BUILDING LATERAL

PIPE MATERIAL:
 5" EXTRA HEAVY CAST IRON
 6" CLASS 53 DUCTILE IRON
 6" PVC DR-18

DEPTH OF SERVICE PIPE AT HOUSE: _____

DEPTH OF SERVICE PIPE AT CONNECTION: _____

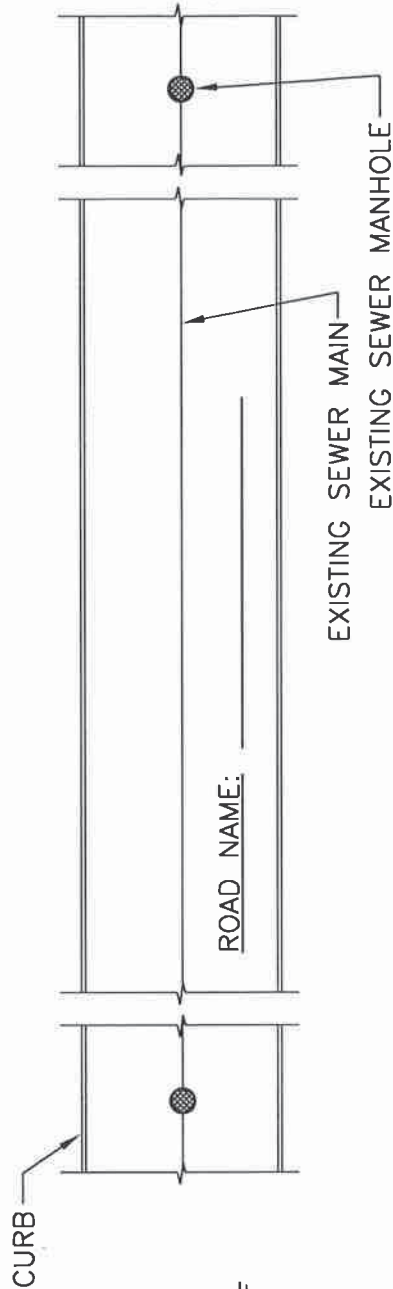
PIPE SLOPE: _____

REFER TO DISTRICT SPECIFICATIONS/ILLUSTRATIONS.

PROPERTY INFORMATION:

ADDRESS: _____

BUILDING OUTLINE



DIRECTIONS: SKETCH NEW SANITARY SERVICE PIPE (BUILDING LATERAL) ROUTE FROM THE BUILDING TO THE PROPOSED CONNECTION POINT. INDICATE LENGTH/SIZE OF NEW PIPING AND ANY FITTINGS, COUPLINGS, ETC. REQUIRED. INCLUDE LOCATION OF WATER SERVICE AND DISTANCE FROM PROPOSED SANITARY SERVICE PIPE TO WATER SERVICE.

GREAT NECK WATER POLLUTION CONTROL DISTRICT

SCALE: N.T.S.

PROPOSED SANITARY SERVICE CONNECTION SKETCH