


# REQUEST FOR SEWER CONNECTION – Year 2012

Tap # 

Commercial/Industrial User **Single Family Equivalents:** \_\_\_\_\_  
(Circle one) (To be determined by District)

Sewer Line: \_\_\_\_\_

Following are the instructions and procedures for obtaining a commercial/industrial sewer tap from the St. Vrain Sanitation District and for making connections to the District's sewer lines. This information is effective as of January 1, 2012 and is subject to change. The District reserves the right to monitor flows and re-evaluate the P.I.F (Plant Investment Fee) at the District's discretion. We recommend that you contact the District office if you have any questions. Office: (303) 776-9570

- Sewer Tap Application.** This "Request for Sewer Connection" is to be completed, signed and submitted to the District office together with the information requested on the Request form and the appropriate fees. Checks for fees should be made payable to "St. Vrain Sanitation District".
- Fees.** The schedule of fees is set forth below. All fees are based upon Single-Family Equivalents (SFE) as defined in the District's rules and regulations.

<b>Plant Investment Fee:</b>	\$ _____	<b>Water Tap Size:</b> _____
<b>Inspection Fee:</b>	\$ <u>\$120.00</u>	
<b>Line Extension Fee:</b> <i>(1/1/14 increase in line extension fee</i>	\$ _____	<b>Monthly Service fee Waived</b> _____
<b>Parallel Fee (If Applicable)</b> <i>call for specific amount.)</i>	\$ _____	
<b>TOTAL TAP CONNECTION FEE/SFE:</b>	\$ _____	

- Inspection of Connection.** All connections from trunkline to residence must be approved by the District's inspector. Inspections can be arranged by faxing our Request for Inspection form to (303) 485-1968. **SVSD has 48 Hours from the time the request is received to complete the inspection.**
- Service Charges and Billing.** The District currently charges \$22.00/month per Single Family Equivalent (SFE). Statements will be sent to you quarterly at the address set forth on your approved Request for Sewer Connection. **SERVICE CHARGES WILL BEGIN ON THE FIRST DAY OF THE MONTH FOLLOWING TAP PURCHASE.** Quarterly payments are due and payable upon receipt of Invoice, and shall be applied for service charges incurred. Notify the District within seven (7) days of the transfer of ownership or change in the billing address.
- Waiving of monthly service fee.** Staff has the option of waiving monthly service fees for a maximum of 3 months, if applicant meets criteria listed in SVSD Rules and Regulations Section 4.9
- Rules and Regulations.** Connection and service are subject to the Rules and Regulations of the St. Vrain Sanitation District as they may be amended from time to time. Copies are available upon request at the District office.

## TO: St. Vrain Sanitation District

11307 Business Park Circle, Firestone, CO 80504 Phone: (303) 776-9570 FAX: (303) 485-1968

I/We hereby apply for issuance of a Sewer Connection and herewith tender the sum of \$ \_\_\_\_\_ dollars to pay for the Plant Investment Fee and Inspection Fee, and Line Extension Reimbursement Fee (if applicable), for said Connection. Applicant grants St. Vrain Sanitation District the right to gather water usage information, including records from the water purveyor for the purpose of determining effluent flow. I/We acknowledge that the Connection if issued will be subject to all Rules and Regulations of St. Vrain Sanitation District, and all County and State Health Department rules and regulations, and in particular, it is understood that the applicant at his/her own expense must bring his/her service lines to the service lines of the District.

<b>Company Name:</b> _____	<b>Date:</b> _____
<b>Applicant Name (Please Print):</b> _____	<b>Legal Description:</b> _____
<b>Signature:</b> _____	<b>Filing:</b> _____
	<b>Phase:</b> _____
	<b>Lot:</b> _____
	<b>Block:</b> _____

**Subdivision:** \_\_\_\_\_

**Service Address:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Billing Address:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Telephone:** (\_\_\_\_) \_\_\_\_\_

**Telephone:** (\_\_\_\_) \_\_\_\_\_

**Wastewater Questionnaire:** \_\_\_\_\_ Received \_\_\_\_\_ Waived

**Number of Employees:** \_\_\_\_\_

APPROVED: \_\_\_\_\_  
SVSD Authorized Personnel Date

The connection will not be made until after inspection of the service lines by the Inspector for the District. I/We hereby agree not to backfill the service line until after said inspection, and further agree not to make the connection to the District sewer line except in the presence of the Inspector for the District. The service lines, taps, tapping saddle and connection have been inspected by the District and have been approved as satisfying all District requirements.

APPROVED: \_\_\_\_\_  
District Inspector Date