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## BROOKS COMMUNITY SERVICE DISTRICT

RESIDENTIAL SEWER PERMIT NO.\_\_\_\_\_

Name					
Street Address					
Telephone					
Mailing address if different					
Number of bedrooms Approximate square foot	age of house				
New Tankyesno (If yes, applicant is responsible for costs of installation will be attached to the permit. A plot plan is required to scale with dimensions from the new tank to the properthe vicinity).	for new installations. The plan shall be to				
Desired date to begin construction					
Applicant's statement:					
I hereby make application to the Brooks Community Service District for sanitary sewer service for one:single family residencemultifamily residence					

I hereby warrant that the above information is true to the best of my knowledge and belief. I agree that I will bear all costs associated with installation of any new tank and service lines and will pay the monthly service charge from date of permit approval. I understand that the tank and service lines shall be installed to service district standards according to the approved site plan (provide a site plan for approval). I understand that all construction must be in accordance with any specifications provided by the District. I understand this permit does not grant permission to construct anything in the public right-of-way. A separate Marion County permit is required to perform work in a public right-or-way.

I understand that the Brooks Community Service District will accept these improvements to the District and maintain them as a part of the District not less than one year after the completion of the improvements to the satisfaction of the District Engineer. I understand that I will be responsible for all corrective maintenance work needed on the improvements during the referenced period.

The Applicant shall indemnify and save harmless the Brooks Community Service District, its governing body, and its officers and employees from all suits and actions: or claims of any character brought because of any injury or damages received or sustained by any person, or property on account of the operations of the said Applicant, his Subcontractors or the employees of either; or on account of or in consequences of any neglect in safeguarding the work; or because of any act or omission, neglect or misconduct of the said Applicant.

		and provisions contained and attached hereto, struction expire one (1) year from date of issue.				
APPI	LICANT SIGNATURE:	DATE				
For District Use Only						
**************PERMIT REQUIREMENTS***********						
INSU	RANCE CERTIFICATION ON FILE [ ]	SUBMITTED HEREWITH [ ]				
ATTACHED STANDARD DRAWINGS: STEP tank, Line Tap, Installation Schematic						
SPECIAL PROVISIONS:						
GEN	ERAL PROVISIONS:					
1.	CALL DISTRICT INSPECTOR AT 503-588-5304, 24 HOURS PRIOR TO START OF WORK AND 24 HOURS PRIOR TO COVERING WORK.					
2.	A copy of an approved permit must be on the job at all times that work is being performed.					
3.	Orenco Systems Inc. shall manufacture all mechanical equipment, as specified on the attached sheets. (Orenco Systems Inc., 814 Airway Avenue, Sutherlin, OR 97479, telephone number 541-459-4449).					
	of Tank required:of Pump required:					
	oved:					
Title:		Expiration Date:				

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