## UTILITY CONNECTION PERMIT APPLICATION (UCP)

## A CERMONT

## Permit #\_\_\_\_\_ Parcel Id#\_\_\_\_\_

## See Utility Connection Permit Policy

Please provide all the information requested in this application. If you have questions please contact the Richmond Water Resources Department at 434-2178. Additional local permits and approvals may also be required, contact the Zoning Administrative Officer at 434-2430.

Applicant Name:	_ Subcontractor Name:		
	_ Subcontractor Mailing Address:		
Phone:			
Applicant (check one):  Company  Contractor  Advisor Li	cense # (of engineer or designer)		
Project Supervisor: Phone: Email:			
	Phone:		
Description of Project:			
go through a plan review process before any work or permit car Water and Wastewater service to future Public OR Privat	within the Richmond Water and Wastewater District are required to to be authorized or commenced. Please see the <b>Policy for providing</b> te land development projects or properties for further details. ust sign here to verify that the application for plan review process is		
Superintendent Signature:	Date:		
	uperintendent on Application for Plan Review)? PUBLIC PRIVATE		
Is project in floodplain?			
Application is for (check all that apply): $\Box$ installation $\Box$ mainter	nance 🛛 overhead utilities 🗆 underground utilities		
Purpose of work (check all that apply): $\Box$ water $\Box$ wastewater			
Project start /end date:/			
Applicants are required to call DIG SAFE, please include the Dig	Safe Permit #:		
The following conditions apply to this approval, please initial allUnless specifically approved by the RWRD, all projects muUnless specifically approved by the RWRD, all projects mu	ist adhere to the Richmond Public Improvement Standards		
	to future Public OR Private land development projects or properties		
	nd the		
2. Water And Wastewater Service Connection Permitting	ng Policy		
Maintain the following work hours: 7:00 AM to 5:00 PM, u	unless other hours are approved.		
Agree to pay any technical review fees incurred by the To	wn for any special inspections deemed necessary.		
Do not leave open excavation during overnight hours (5:0	0 PM to 7:00 AM, unless otherwise noted below).		
Restore any public infrastructure to the condition found a	t the start of construction.		
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Along with this completed form please include the following:

□ Two paper copies and one electronic copy of the requirements indicated in the WATER AND WASTEWATER SERVICE CONNECTION PERMITTING POLICY

Utility Connection Permit Fee— \$1500 for Private \$1200 for Public

**Submit the completed application form with the required fee to Planning & Zoning Office**. The application will be forwarded to the Richmond Water Resources Department for their approval in addition to the Richmond Zoning Administrator's approval.

Signatures: The undersigned hereby certifies this information to be complete and true.

Property Owner Signature	date	Subcontra	actor Signature	date
<b>NOTE:</b> This permit shall expire 6 month	hs from date of issuance. Or	ne extension may be reque	ested and approved by the	e RWRD Superintendent and
Zoning Administrator for up to an add	ditional 6 months. Please see	e the WATER AND WAS	TEWATER SERVICE COP	NNECTION PERMITTING
	POLICY	<b>Y</b> for more details.		
DO NOT WRITE BELOW THIS LINE	E USE ONLY—DO NOT WRITE BEL	OW THIS LINE—OFFICE USE ON	ily—DO NOT WRITE BELOW TI	HIS LINE—OFFICE USE ONLY —-
Application and fee received by ZAO	& forwarded to Water Re	esources Department (d	date & initial):	
Permit Fee:				
Recording Fee:	-			
Forward application to Water Reso	ources for review—			
Is a construction inspection by RWRD	D required? YES / NO Nc	otes:		
Is an independent professional inspe	ection required? YES / NO	Notes:		
Date of completed construction inspe	ection:			
Date of completed independent prof	fessional inspection:			
Additional Water Resources Commer	nts:			
Water Resources Superintendent Sig	;nature:		Date:	
Return approved application to Plann	ning & Zoning Office for a	pplicant notification an	ıd filing and recording	
(ZAO date & initial of receipt):				
Expiration of Permit Date:				
TOWN CLERK'S OFFICE Received for	r Record:	A.D	Ato'clock	cM
And Recorded in Book:	page	Attest:		