ADAIAN TOWNSHIP	Application for Sewer-Connection refult
Property Owner	Phone
Property Address	
Single-Family Resi	dence Multi-Family Residence Commercial Building
Township sanitary-sew	rmit to connect the above-identified property to the er system. I will comply with all requirements of and local ordinances, including the following:
2. Consent to inspect outside the buildi 3. Use specified stan 4. Connect ALL wastew 5. NOT connect any st 6. Disengage all exis ment regulations.	and permit fee \$\frac{1}{2} \] and permit fee \$\frac{1}{2} \]. ion of materials and workmanship both inside and ng. dard materials and construction methods. atter discharge from building to sanitary-sewer system. Form-water or ground-water drainage to this system. It in ground tanks according to County Health Department by date of
Installer's Na	me:
Installer's Ad	dress:
Approximate da	te of planned connection
Owner's Signature	
*********	***************************************
Receipt No.	Received Cash Check No
Received by	Date
******	************************************
Adrian Township Sewer	-Connection Permit No Date
Issued to	
	Tax Roll No.
Connection is to be c	ompleted by date of
Issued for Adrian Tow	nship by
NOTE: Installer is re	
for applica	with all applicable state laws and local regulations. The state plumbing permit and inspection. Its DIG (1-800-482-7171) before disturbing utilities.
before maki house lead ends shall • to use spec	for inspection appointment at least hours ng sewer connection. Plug shall NOT be removed from except in inspector's presence. Connections at both NOT be covered until inspector approves. If it is and satisfactory workmanship, age to the public system caused by connection.

white: Township/yellow: Drain Commission/pink: Installer/goldenrod: Owner

Inspection Report

Installer	1.
Type and size of pipe	2.
Single-family Residence Internal plumbing inspe	
All wastewater-discharg	ge points are connected.
No downspouts, footer d	irains, ground drains or flowing wells connected.
Septic tanks eliminated	Health Dept. notified N.A.
Remarks:	

Inspected: