

**Tusten Water and Sewer Dept  
210 Bridge St.  
P.O. Box 195  
Narrowsburg, NY 12764**

**Dominic Hillard  
Sewer Superintendent  
Phone/Fax: (845) 252-7376**

**Route 17B Sewer Extension Completion Certification**

Section \_\_\_\_\_ Block \_\_\_\_\_ Lot \_\_\_\_\_

**Property Owner:** \_\_\_\_\_

**Certification for the Property Located at:**

\_\_\_\_\_ in the Route 17B Sewer District.  
*(physical address)*

I, \_\_\_\_\_, do hereby certify that the connection to the public  
*(Owner or Contractor)*  
sewer main, pursuant to application dated \_\_\_\_\_, permit dated \_\_\_\_\_, was completed on  
\_\_\_\_\_ all in accordance with the specifications and regulations of the Town of Bethel.  
*(date)*

Dated: \_\_\_\_\_

\_\_\_\_\_  
Owner or Contractor Signature

Dated: \_\_\_\_\_

Completion Approval: \_\_\_\_\_  
Sewer Superintendent