

**TOWN OF CLOVERDALE
RESIDENTIAL SANITARY SEWER PERMIT**

NUMBER _____

I, _____, the undersigned, do hereby apply for a permit of \$250.00 per Ordinance: Chapter 9, Article 7, Sec. 9-75 and Sec. 9-76.

Chapter 9, Article 7, Sec. 9-75 Stating: All persons, firms or corporations owning real estate in Cloverdale, Putnam County, Indiana, are required to make all taps or connection to town sewers prior to undertaking and construction thereon which necessitates sewer services thereto and to obtain a permit from the Utility Clerk of the Town of Cloverdale therefore. Ord. No. 1982-7 & 1, 12-14-82: Ord. No. 2009-5, & A, 3-10-09.

Chapter 9, Article 7, Sec. 9-76, Stating: All parties desiring to make any connection whatsoever with any sewer main of the Town of Cloverdale first obtain written permission from the Clerk-Treasurer of said Town and pay a fee therefore, according to the following schedule.

Residential	\$250.00
Industrial, minimum plus cost of time, labor and materials	\$250.00

1. Provide the following information:

A. Attach 3 copies of lot plan including dimensions of both lot, any existing structures and proposed structure. Detail drawing of structure to be constructed.

B. Is public water supply available? _____ Yes _____ No

Tap fee paid? _____ Yes _____ No

C. Is public sewer available? _____ Yes _____ No

Tap fee paid? _____ Yes _____ No

D. Location: Billing address: _____

Property Address: _____

Lot number _____ Phone # (where you can be reached) Day: _____ Night: _____

E. Zoning Classifications of building site _____

F. Flood Plain _____ Yes _____ No

2. Construction must start within 90 days of issuance of this permit or permit is invalid. Providing the previous 90 day provision is complied with, this permit is valid for 2 years.

3. **The Town Manager or Building Commissioner shall be notified of the sanitary sewer tap for inspection prior to proceeding to the next state of construction. 24 hour notice is required for an inspection. Inspections held Monday through Friday only.**

RED CARD (STOP WORK), GREEN CARD (STAGE OF WORK COMPLETED - CONTINUE)

4. **I certify the above information is true and correct to the best of my knowledge and by my signature below do accept this as a receipt of the following fee paid by me to the Town of Cloverdale.**

5. Applicant's Signature: _____ Inspection fee of \$ _____

Date: _____ issued this _____ day of _____ 20 _____.

Inspector Signed: _____

NOTE: Additional inspections may be required. The home owner and/or contractor will be responsible for inspection to be called for. Certificate of Completion must be issued before you can proceed. Returned check fee \$30.