



"The Bedding Plant Capital of Connecticut"

TOWN OF CHESHIRE

WATER POLLUTION CONTROL AUTHORITY (WPCA)

84 South Main Street • Cheshire, Connecticut 06410
Phone: 203-271-6650 • DPWengineering@chshirect.org

Office Use Only
Date Rec. _____
App. No. _____
Total Fee: _____

WATER POLLUTION CONTROL AUTHORITY (WPCA) APPLICATION

PLEASE COMPLETE ALL PARTS BELOW. *INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED.*

TYPE OF APPLICATION: *(Check Only One)*

- Feasibility Approval for Extension of Public Sanitary Sewers
- Final Design & Award of Capacity (Date of Feasibility Approval: _____)
- Petition for Sewer Service Map Amendment

PROPERTY/PROJECT INFORMATION:

Project Name (If Applicable) _____		Project Location (Street Address) _____	
Zoning District _____	Map No. _____	Lot No. _____	

APPLICANT INFORMATION:

Name: _____ Phone: _____

Mailing Address: _____

Email: _____

Applicants Authority to file application: *(Check one)* Owner of Record Power of Attorney Other _____

OWNER(S) INFORMATION: *(If Not Applicant)* *(Add additional sheets if necessary)*

Name: _____ Phone: _____

Mailing Address: _____

Email: _____

AGENT/REPRESENTATIVE INFORMATION: *(If Applicable)*

Name: _____ Phone: _____

Mailing Address: _____

Email: _____

Agent Affiliation: *(Check one)* Attorney Engineer Surveyor Architect Other _____

PROJECT DETAILS: (Check and Fill in all that Apply)

- New Discharge / New Connection
- Existing system with substantial change in the volume or character of pollutants being discharged. (**Attach Explanation**)
- Single-Family Residential Number of Bedrooms _____ Estimated Daily Flow in Gallons per Day _____
- Multi-Family Development Number of Units _____ Estimated Daily Flow in Gallons per Day _____
- Commercial Use: _____ Estimated Daily Flow in Gallons per Day _____
- Industrial Use: _____ Estimated Daily Flow in Gallons per Day _____

Total estimated capacity required: _____ (Gallons per Day). (**Attach Calculations**)

Water service: Public Water; OR Private Domestic water well

This project has been submitted to the Planning & Zoning Commission for approval. (Date of Meeting: _____)

This project has been previously approved by the Planning & Zoning Commission. (Date of Approval: _____)

Estimated date of occupancy: _____

Proposed Sewer ownership: Private Sewer System Public Sewer System (*To Be Conveyed to the Town of Cheshire*)

Proposed Sewer Type: Gravity Sewer System Low Pressure Sewer System Pump Station

Pump Information: No Pumps Proposed Grinder Pump* Non-Clog Pump* Effluent Pump*

*Number of pumps: _____ Make/Model: _____

ADDITIONAL INFORMATION:

- YES NO Is the property located in the Sewer Service Area (SSA)?
- YES NO Does the property have an existing sewer lateral available for connection?
- YES NO Does the property require sewer extension for connection?
- YES NO Is the site currently served by an on-site sewage disposal system?
- YES NO Parcel is reported having problems with their on-site sewage disposal system?
- YES NO Are there any exiting/proposed sewer easements? (If so, please add to project narrative and explain)
- YES NO Is food preparation occurring on the Property? (If yes, provide Public Health Code Classification: _____)
- YES NO Is a Grease Separator required? (If so, please add to project narrative and explain)
- YES NO Does project include a swimming pool and/or spa amenity?
- YES NO Will the project involve being constructed in phases? (If so, please add to project narrative and explain)

APPLICATION CHECKLIST: *(Check all that Apply & Attach the following)*

- Completed Application along with all supporting documentation outlined below. **(Original only)**
- Locus Map outlining the project area. **(8 additional copies)**
- Project narrative describing the project and detailing necessary information. This should also include the anticipated start date, construction phases/dates, ownership of the sanitary sewer and any easements required for construction. **(8 additional copies)**
- Estimated average daily demand & peak flow computations for immediate/future service areas. **(8 additional copies)**
- Two (2) full size copies** of the design plan(s), signed and sealed by the professional(s) responsible for the plan.
- Eight (8) reduced size 11"x17" copies** of the design plan(s)
- Digital copy** (pdf format) of application and supporting documentation listed above. (Email to: DPWengineering@cheshirect.org)
- Proposed Developer's Agreement which is acceptable to the WPCA and the Town Attorney, if applicable.
- Application Fee in the form of a check made payable to "Town of Cheshire" (See Fee Schedule below):

APPLICATION TYPE	Single-Family Residential	Multi-Family Commercial/Industrial
Feasibility Approval	\$150	
Final Design & Award of Capacity ⁽¹⁾	\$250	\$400
Sewer Service Map Amendment ⁽²⁾ <i>(Includes Public Hearing Fees)</i>	\$375	

(1) An additional \$750.00 fee shall apply for any pump station or low-pressure force main review.
 (2) An additional \$500.00 fee shall apply if GIS mapping services are required after Public Hearing.

ACKNOWLEDGEMENT: *(All Applications)*

(Add additional sheets if necessary)

I/We hereby acknowledges that this application and statements submitted herewith are true to the best of my/our knowledge and approval of the application is contingent upon compliance with all requirements of town regulations; and

I/We have reviewed, understand, and will comply with The Town of Cheshire Sewer Regulations; and will provide such other data or information as may be requested by the Director or the WPCA as they deem necessary to decide on the application; and

Official representatives and agents of the Town of Cheshire are authorized to enter the property, at reasonable times, for purposes of inspection, observation, measurement, sampling, and testing.

Printed Name:

Signature:

Date:

Applicant

Agent

Property Owner

Property Owner