## City of Winlock



## Public Works Department Side Sewer Permit Application

PO Box 777 • 323 N.E. First Street

Winlock, WA 98596-0777
360.785.3811 • fax 360.785.4378

winws@cityofwinlock.com

Owner   Tenant   Authorized Agent   Name(s):	Site Plan  ALL plans must include installation/repair location  An enginnered design may be required  As-Built Diagram using existing plot plan  Must provide prior to final inspection  Right-of-Way Permit: if applicable  Grinder Pump Service Agreement: grinder pump only  Recorded Easement: grinder pump only  Additional permits may be required  Applicant must call for underground locates: 1-800-424-5555  APPLICANT INFORMATION  Owner Tenant Authorized Agent  Name(s):  Mailing Address:  Phone #: Email:  CONTRACTOR INFORMATION  Company Name:  Contractor License #: Busines  Mailing Address:  Phone #: Email:  PROPERTY INFORMATION  Existing Structure New Construction Single-Family  Site Address: P  Action: New Side Sewer Repair Side Sewer Gravity S  I/we certify to obtain a copy of the City of Wilock Side Sewer Standards and other pertina proposed side sewer, and agree to comply fully herein that all plans, specifications, and o conform to the requirements of all federal/state, and local codes and applicable laws and owner of this property or their authorized representative. With this document, I take full rederal/state, and local codes and applicable laws and owner of this property or their authorized representative. With this document, I take full rederal/state, and local codes and applicable laws and owner of this property or their authorized representative. With this document, I take full rederal/state, and local codes and applicable laws and owner of this property or their authorized representative. With this document, I take full rederal/state, and local codes and applicable laws and owner of this property or their authorized representative. With this document, I take full rederal/state, and local codes and applicable laws and owner of this property or their authorized representative. With this document, I take full rederal/state.	City/St/Zip:
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