

**DALTON
FIRE
DISTRICT**

(413) 684-6118
(413) 684-0500
(413) 684-6174

20 FLANSBURG AVENUE
DALTON, MA 01226-1409

APPLICATION FOR PERMIT

DATE _____

TO THE WATER COMMISSIONERS,

RE: STREET ADDRESS _____ MAP/BLOCK/LOT NO. _____

I, THE UNDERSIGNED _____
(NAME)

(MAILING ADDRESS)

(TELEPHONE NUMBER)

HOMEOWNER, OR ACTING AS THE LEGAL AGENT FOR _____
(NAME)

(MAILING ADDRESS)

(TELEPHONE NUMBER)

IN CONSIDERATION OF A DEPOSIT OF \$ _____ DO HEREBY APPLY FOR A PERMIT TO:

- A) () CONNECT TO THE DISTRICT WATER MAIN IN _____ USING A _____ INCH _____ PIPE.
- B) () INSTALLATION OF A NEW WATER MAIN TO DISTRIBUTION SYSTEM IN _____ USING A _____ INCH _____ PIPE.
- C) () REPAIR OR RENEWAL OF AN EXISTING WATER SERVICE USING A _____ INCH _____ PIPE. EMERGENCY ___ YES ___ NO
- D) () INSTALL REMOTE-READING WATER METER (NOTE: NEPTUNE REMOTE-READING (PROREAD) IN GALLONS REQUIRED)
MODEL: _____ SIZE REQUESTED: HOUSES: 5/8 x 3/4 INDUSTRY: _____
- E) () **INSTALL A CROSS-CONNECTION DEVICE (PROVIDE PLUMBING SCHEMATIC APPROVED BY CERTIFIED CROSS CONNECTION CONTROL SURVEYOR)**
MODEL: _____ SIZE: _____
- F) () KILL OR DISCONTINUE WATER SERVICE TO: _____

MY PLUMBER WILL BE: _____
(NAME) (MAILING ADDRESS) (TELEPHONE NO.)

MY CONTRACTOR WILL BE: _____
(NAME) (MAILING ADDRESS) (TELEPHONE NO.)

A COPY OF PERFORMANCE BOND, OR A CERTIFICATE OF INSURANCE, FROM THE OWNER, OR OWNER'S CONTRACTOR IS REQUIRED PRIOR TO THE COMMENCEMENT OF WORK UNDER THIS PERMIT.

IN CONSIDERATION OF ISSUANCE OF SUCH A PERMIT, I HEREBY AGREE TO COMPLY WITH AND CONFORM TO ALL LAWS, RULES ORDINANCES, AND GENERAL CONDITIONS OF PERMITS, REGULATIONS AND POLICIES OF THE DALTON FIRE DISTRICT, TOWN OF DALTON, STATE OR FEDERAL GOVERNMENT CONCERNING THE CONSTRUCTION AND PROPER MAINTENANCE AND OPERATION OF WATER FACILITIES AS MAY APPLY. I FURTHER AGREE TO HOLD HARMLESS THE SAID DALTON FIRE DISTRICT, THE TOWN OF DALTON AND ITS AGENTS FROM ANY AND ALL LOSS, COST, DAMAGE, OR EXPENSES IN CONNECTION WITH OR CONSEQUENT UPON THE PERFORMANCE OF SAID WORK AND TO WAIVE ALL CLAIMS FOR DAMAGE IN CASE OF REVOCATION OF ANY PERMIT ISSUED PURSUANT TO THIS APPLICATION.

TELEPHONE: _____

(SIGNATURE)

THIS IS NOT A PERMIT

NO WORK IS TO BE PERFORMED UNTIL A PERMIT IS GRANTED