



TOWN OF COVENTRY
Department of Public Works
1670 Flat River Road, Coventry, RI 02816-8911
Tel. (401) 822 - 9189 • Fax (401) 822-9132

Application for Sewer Connection - Residential

Application for sewer connection, using Coventry Reserve Capacity at the West Warwick Regional Treatment Facility, for the Town of Coventry, Assessor's Plat _____, Lot _____, is hereby made by _____, the owner of property located at _____, Coventry, RI.

The application is accompanied by:

Appropriate Permit Application Fees made payable to the **Town of Coventry**, which are:

___ Permit Application Fee \$100.00

___ Inspection Fee \$200.00

___ 4 Copies of the engineer's plans and specifications. For most residential connections, Licensed contractors are capable of producing a plan for the connection. *Multi-family residential, after reviewed and approved by engineer, applicant will be notified to submit 10 more copies of the plans and specifications for the Sewer Subcommittee.

___ Copy of Assessor's map showing location of property.

Name of Contractor: _____

Owner: _____ Signature Owner: _____ Signature

Please submit this application with all of the applicable items outlined above to the Coventry Department of Public Works. *Multi-family residential - application will need to be put on the Sewer Subcommittee agenda for recommendation to the Town Council for final approval.

For Town use only:

This application has been reviewed and determined to be complete:

Signed: _____ Date: _____