

**APPLICATION AND PERMIT
FOR SEWER CONNECTION OUTSIDE OF THE CITY LIMITS
CITY OF MT. SHASTA
305 NORTH MT. SHASTA BLVD.
MT. SHASTA, CALIFORNIA 96067
530-926-7510 530-926-7521 Fax**

Date: _____

Project Location: _____ Assessor's Parcel No: _____

Street Address: _____ Phone Number: _____

Property Owner Name: _____ Mailing Address: _____

The undersigned hereby request permission to connect to the City of Mt. Shasta sewer main at the above-described location as follows:

I understand that the sewer connection fee for said connection is \$ _____ and must be paid to the City of Mt. Shasta prior to the issuance of a building permit from Siskiyou County.

I understand that an inspection fee of **\$150.00** must be paid to the City of Mt. Shasta at the same time as the connection fee payment.

I understand that all expenses for said connection will be borne by me.

I understand that there will be a monthly sewer service charge payable to the City of Mt. Shasta commencing upon the date of connection.

I understand that all lateral materials and installation shall be done per City Specifications.

I understand that the City of Mt. Shasta is not responsible for the performance of a lateral that is connected to the City sewer main.

I understand that a backflow prevention device may be required prior to connection per City specifications.

I understand that no direct connection to a City main interceptor line will be allowed without the installation of a positive pressure force main.

I understand that if connection is made to a City sewer main that is within an easement on my property, or other property, that an Encroachment Permit may be required from the City.

I understand that the City will require an inspection of the lateral line by the City of Mt. Shasta Building Inspector prior to any backfill placement.

If Siskiyou County does not issue a building permit for this project, the connection will be considered null and void and fees paid will be refunded without interest.

Applicant Signature: _____ Owner Signature: _____

Permit Approved & Issued By: _____ Date: _____
City of Mt. Shasta

Sewer Connection Fee \$ _____ Date Paid: _____

Inspection Fee of \$150.00 Paid: _____ Date of Connection: _____

Inspection Approved By: _____