



Warrington Township Water & Sewer Department  
852 Easton Road  
Warrington, PA 18976



**SEWER CONNECTION PERMIT**

Date: \_\_\_\_\_ Fee Paid: \_\_\_\_\_ Permit #: \_\_\_\_\_

Owner's Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Address of Property: \_\_\_\_\_

Tax Parcel #: \_\_\_\_\_ Account #: \_\_\_\_\_ Walk Rte: \_\_\_\_\_

Plumber: \_\_\_\_\_

Plumber Address: \_\_\_\_\_ Phone #: \_\_\_\_\_

Pursuant to the application for a sewer connection permit, this permit is issued to the undersigned homeowner or registered Master Plumber, as agent for the owner, for connection of the building sewer (house lateral) with the public sanitary sewer system.

This permit is issued in accordance with the Ordinances and Resolutions and Rules and Regulations of Warrington Township and of the Warrington Township Water & Sewer Department respectively, relation to the sanitary sewer system constructed in the Township by Warrington Township Water & Sewer Department.

I agree to notify the W.T.W.S.D. Inspector at 215-343-1800, at least five (5) working days in advance, when the building sewer is ready for inspection and connection to the public sewer, but before any portion of the work is covered. I further agree that I shall not permit a sump pump or roof drainage to be connected to, or enter the sanitary system from the above described premises. Septic tanks/ cesspools must be filled in.

Applicant signature: \_\_\_\_\_

Warrington Township W&S Department: \_\_\_\_\_

Approved By: \_\_\_\_\_ Plumbing Inspector

Date: \_\_\_\_\_

Date of Hook up: \_\_\_\_\_

Septic System Filled In: \_\_\_\_\_