

TEHAMA COUNTY SANITATION DISTRICT NO. 1

MINERAL, CALIFORNIA

BUILDING SEWER CONNECTION PERMIT

PROPERTY OWNER: _____

MAILING ADDRESS: _____

PHONE NUMBER: _____

ASSESSOR'S PARCEL NUMBER: _____ 1995 ASSESSMENT NO.: _____

AUTHORIZED REPRESENTATIVE: _____ PHONE NO.: _____

INSTALLER: _____ PHONE NO.: _____

This Permit is issued as follows:

FEE: As specified in Ordinance 15.

TERM OF PERMIT: The term of the installation and the Permit will be void two years after issuance. (Per Ordinance No. 15) Please include a plot plan showing property boundary lines and proposed sewer line.

EXTENSION OF PERMITS: Extensions will not be granted, except under authorization of the District Engineer of the Tehama County Sanitation District No. 1.

PERMIT IS VALID ONLY FOR RESIDENCE AT THE SERVICE ADDRESS LISTED ABOVE.

PERMIT IS NOT TRANSFERABLE OR SALEABLE.

Representatives of the district shall be notified at (530) 385 1462 at least forty-eight (48) hours prior to connecting to district facilities to allow inspection of the actual connection.

Contractor's License Law Certificate (Complete either A or B)

- A. The applicant is licensed under the provisions of the California Contractor's License Law under license number _____ which is in full force and effect.
- B. The applicant is exempt from the provisions of the California Contractor's License Law for the following reason:
 1. Use Licensed Contractor
 2. Owner/Builder

Worker's Compensation Certificate

I am aware of the provision of Section 3700 of the California Labor code which requires every employer to be insured against liability for Workman's Compensation.

A currently effective certificate of Worker's Compensation Insurance coverage is on file with Tehama County Sanitation District No. 1.

I certify that in the performance of the work for which this application is made I shall not employ any person.

I hereby state that the information above is true to the best of my knowledge and agree to comply with Tehama County Sanitation District No. 1's "PLANS and SPECIFICATIONS" in regard to the construction of the Building Sewer. I understand that this permit must be on site before construction begins. I understand that the annual sewer user service charge is \$516.00 per household equivalent, and that the annual service charge will be prorated from the date of inspection and acceptance of the sewer lateral by the District.

I further state that I am ***the owner of the property***, ***the owner's authorized representative***.

I understand that approval by Tehama County Sanitation District No. 1 for construction of the Building Sewer in no way indicates that a guarantee of perfect and indefinite operation of this Building Sewer, and that the owner is required to maintain and make any repairs necessary to keep the system operational with no excessive leakage.

Signed: _____

Date: _____

APPLICANT IS RESPONSIBLE FOR MAINTAINING ALL REQUIRED SETBACKS

This institution is an equal opportunity provider.

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DISTRICT USE ONLY

Issued by: _____

Date: _____

Inspected by: _____

Date: _____

Permit expiration date: _____

Comments: _____

Copies: White
 Building Department

 Yellow
 District

 Pink
 Owner

The following information is requested by the Federal Government in order to monitor compliance with Federal laws prohibiting discrimination against applicants seeking to participate in the program. You are not required to furnish this information, but are encouraged to do so. This information will not be used in evaluating your application, or to discriminate against you in any way. However, if you choose not to furnish it, we are required to note the race/national origin of individual applicants on the basis of visual observation or surname.

Please check one box for each of the following categories:

Ethnicity Category

- Hispanic or Latino
- Not Hispanic or Latino

Race Category

- American Indian or Alaska Native
- Asian
- Black
- Native Hawaiian or Other Pacific Islander
- White