

# WATER/SEWER CONNECTION PERMIT

City of Sullivan  
210 West Washington  
Sullivan, MO 63080  
573-468-8965

Parcel ID Number:	Dig-Rite Locate Number:
Date:	Plumber:
Owner:	Address:
Phone:	Phone:
Drainlayer License:	Plumber License:

Building Location (address/property description):

Type of Connection:  Residential  Commercial  Industrial  Accessory  Other (Specify) \_\_\_\_\_

### Water Connection

Water Main Location:	Size:
<input type="checkbox"/> New Construction <input type="checkbox"/> Replacement/Repair	Material Type: <input type="checkbox"/> Size ____ <input type="checkbox"/> Plastic <input type="checkbox"/> Copper <input type="checkbox"/> Other (Specify) ____

Permit Fee:  3/4" Meter Assembly (\$440)  
 Excess of 3/4" Meter Assembly (cost of material and equipment plus 10%)  
 Excavation Permit Required

### Sewer Connection

Sewer Main Location:	Size:
<input type="checkbox"/> New Construction <input type="checkbox"/> Replacement/Repair Flow Type: <input type="checkbox"/> Gravity <input type="checkbox"/> Grinder Type	Material Type: <input type="checkbox"/> Size ____ <input type="checkbox"/> Schedule 40 (ASTM 2665) <input type="checkbox"/> Other (Specify) ____

Permit Fee:  Class A-4" Sewer Tap (\$500.00)  
 Class B-Excess of 4" Sewer Tap (\$600.00)  
 Excavation Permit Required

Signature:	Date:
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### OFFICE USE ONLY

Permit Received by:	Date:	
Connection Approved By:	Date:	
Date Fee Paid:	Amount Paid:	Check Number:

**Notes:**

1. Attach site plan of proposed connection.
2. Contact the Water & Sewer Department at 573-468-4812 twenty-four (24) hours prior to excavating to allow for scheduling of tap and inspection.
3. Dig-Rite locate number required prior to issuance of permit (Fidelity locate valid for ten (10) days after issuance.)