



# Borough of Somerset

## Building Inspection Department

P.O. Box 71, 347 West Union Street, PA 15501-0071

Office: (814) 445-5595 \* Fax: (814) 445-3931

www.somersetborough.com

### Application for Sewage Service

#### OFFICE USE

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

Permit Fee: \_\_\_\_\_

Permit No.: \_\_\_\_\_

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

Building Permit No.: \_\_\_\_\_

Check No.: \_\_\_\_\_

#### Proposed Use

##### Residential

Single Family

Multi Family

##### Commercial

Retail

Restaurant

Apartment Building

Hotel/Motel

Church/Religious

Hospital

Office, Bank, Professional

School

Other \_\_\_\_\_

Property Location: \_\_\_\_\_

Owner: \_\_\_\_\_

Owner Address (If different from above): \_\_\_\_\_

Phone No.: \_\_\_\_\_ Cell Phone No.: \_\_\_\_\_

It is the owner or agent's responsibility to provide to the Borough of Somerset for any commercial use the average daily flow that will be used for the proposed construction.

Average Daily Flow: \_\_\_\_\_ EDU's Requesting: \_\_\_\_\_

**The undersigned hereby agrees to abide by all rules, regulations and ordinances governing the Borough of Somerset's Sewage System currently in existence or as amended.**

PRINT Applicant Name: \_\_\_\_\_

Applicant Signature: \_\_\_\_\_

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

Building Code Official: \_\_\_\_\_

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

For more information regarding building permits/zoning visit our website: [www.somersetborough.com](http://www.somersetborough.com)