



SIDE SEWER PERMIT APPLICATION

CONTRACTOR INFORMATION:

| | |
|------------------|-------------------------|
| Company Name: | Site Contact: |
| Company Address: | Phone #: |
| City: | Email #: |
| State License # | City Business License # |
| Expiration Date: | |

PROPERTY INFORMATION:

Address:

Owner's Name:

Phone #:

☐ FULL LINE REPLACEMENT ☐ SPOT REPAIR ☐ PIPE BURST ☐ RELINE (PERMALINE ONLY)

DESCRIPTION OF PROPOSED WORK (Be Specific):

ISSUANCE OF THIS PERMIT DOES NOT CONSTITUTE PERMISSION TO WORK ON ANY PROPERTY OTHER THAN THAT OWNED BY THE SUBJECT PROPERTY OWNER.

CERTIFICATIONS NECESSARY FOR INSTALLATION METHODS ARE THE RESPONSIBILITY OF THE CONTRACTOR PERFORMING SAID WORK.

I REPRESENT AND WARRANT TO THE CITY OF EDMONDS, IF REPAIR OF EXISTING SEWER EXTENDS TO AN ADJACENT PROPERTY, I HAVE OWNERS EXPRESS PERMISSION TO PERFORM WORK ON THAT ADJACENT PROPERTY.

SIGNATURE _____ DATE _____
Contractor or Agent

NO WORK SHALL BEGIN PRIOR TO PERMIT ISSUANCE