

**ORANGE COUNTY SEWER DISTRICT NO. 1  
APPLICATION FOR SEWER LATERAL CONSTRUCTION, REPAIR,  
MODIFICATION AND/OR CHANGE OF USE**

NOTE: This application must be completed by all property owners within Orange County Sewer District No. 1 who are requesting the review of sanitary sewer lateral construction plans and/or (*Please check all that apply*):

- 1) Requesting a PERMIT FORM to construct a Building Lateral Sewer,
- 2) Planning to REPAIR, MODIFY or CAP/SEAL (*Circle One*) an existing Building Lateral Sewer,
- 3) Planning to CHANGE Property Usage and/or the number of LIVING UNITS permitted to discharge from an existing building lateral sewer,
- 4) Planning to CHANGE the QUALITY and/or QUANTITY of WASTEWATER permitted to discharge from an existing building sewer lateral,
- 5) Requesting a PERMIT FORM to construct a Pre-treatment Process.

**NOTE:** This form MUST be completely filled out. For an item that is not applicable (N/A), write N/A in the space provided.

Brief Description of Request or Plan. (*Include the anticipated date(s) of commencement/completion for the above request(s) or plan(s) (The anticipated dates are mandatory)*): \_\_\_\_\_

*(SPECIAL NOTE: Enclose copies of any and all Local Approvals, including but not limited to building permit(s), sewer permit(s), Site Plan Approval, Sub-Division Approval, Tax Map Site Plan and related info.)*

**I. PROPERTY INFORMATION:**

TAX MAP DESIGNATION: Section \_\_\_\_\_, Block \_\_\_\_\_, Lot \_\_\_\_\_.

PROPERTY ADDRESS, TWN, ST, ZIP: \_\_\_\_\_

PROPERTY NEXT NEAREST STREET, ROAD, AVE.: \_\_\_\_\_

REQUESTED DATE OF LIVE SEWAGE DISCHARGE (**Mandatory**): \_\_\_\_\_

**II. PROPERTY OWNER AND CONTRACTOR INFORMATION:**

PROPERTY OWNER NAME (please print): \_\_\_\_\_

OWNER ADDRESS, TWN, ST, ZIP: \_\_\_\_\_ PHONE: \_\_\_\_\_

CONTRACTOR NAME (PRINT): \_\_\_\_\_

CONTRACTOR ADDRESS, TWN, ST, ZIP: \_\_\_\_\_ PHONE: \_\_\_\_\_

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**III. PROPERTY BUILDING INFORMATION (Existing and/or Planned):**

Tax Map Designation: Section \_\_\_\_\_, Block \_\_\_\_\_, Lot \_\_\_\_\_.

Site Plan Building Number: \_\_\_\_\_ Total Number of Building Entrances (Including Garage Doors): \_\_\_\_\_

Single Family \_\_\_\_\_ Two Family \_\_\_\_\_ Multi-Family with \_\_\_\_\_ Units/Apartments

At Home Occupation with \_\_\_\_\_ Business Area(s) and \_\_\_\_\_ Employees Total  
Describe Type Of Business(es): \_\_\_\_\_.

Commercial with \_\_\_\_\_ Stores and \_\_\_\_\_ Employees Total  
Describe Type Of Commercial Use: \_\_\_\_\_.

Industrial with \_\_\_\_\_ Gallons per Day of Wastewater Discharge and \_\_\_\_\_ Employees Total  
Describe Type of Industry and Discharge Type: \_\_\_\_\_.

Total Number of Fixtures: \_\_\_\_\_ Bathtubs, \_\_\_\_\_ Shower Stalls, \_\_\_\_\_ Sinks (slop and basin),  
\_\_\_\_\_ Kitchens, \_\_\_\_\_ Garbage Disposal Units, \_\_\_\_\_ Toilets/Water Closets.

**IV. SEWER LATERAL CONSTRUCTION INFORMATION:**

Length of Sewer Lateral Line \_\_\_\_\_ feet Diameter of Sewer Lateral Line: \_\_\_\_\_ inches

**V. MUNICIPAL APPROVALS (As Required):**

Municipal Site Plan Approval (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_ (If yes, enclose copy of Municipal Approval and Engineering Site Plan.)

Municipal Formal Final Sub-Division Approval (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_ (If yes, enclose Municipal Approval and Engineering Site Plan.)

Municipal Building Permit Issued (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_ (If yes, enclose copy of Building Permit.)

**VI. PROJECT APPLICANT INFORMATION:**

APPLICANT NAME (Print): \_\_\_\_\_ ORGANIZATION: \_\_\_\_\_

ADDRESS, TWN, ST, ZIP: \_\_\_\_\_ PHONE: \_\_\_\_\_

PROJECT SITE MAP ENCLOSED (Y/N): \_\_\_\_\_ (i.e. Tax Map, Site Plan, Parcel Plat, Sketch, etc.)

APPLICANT SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

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**VII. ADDITIONAL INFORMATION:**

In the space provided below, include any other information or comments you would like to include with your request or plan:

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**FOR OFFICIAL USE ONLY**

**I. Village of Kiryas Joel Review (For Construction Within V-KJ Only):**

Tax Map Designation: Section: \_\_\_\_\_, Block \_\_\_\_\_, Lot(s) \_\_\_\_\_.

Village Planning Board Site Plan Approval For \_\_\_\_\_ Unit(s). Date of Village Planning Board Approval: \_\_\_\_\_

Total Sewer Units of Use Applied For: \_\_\_\_\_ Unit(s). Total Sewer Units of Use Approved by Village \_\_\_\_\_ (Units)

Comments: \_\_\_\_\_

Sewer Units of Use Approved By (Print Name): \_\_\_\_\_ Title : \_\_\_\_\_

Sewer Units of Use Approved By: (Signature): \_\_\_\_\_ Date: \_\_\_\_\_

**Place Village Seal of Approval Here:**

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**II. Account Clerk Review:**

Current Permit Number(s): \_\_\_\_\_ Current Permitted Units: \_\_\_\_\_ Current Billable Units: \_\_\_\_\_

Comments: \_\_\_\_\_ Reviewed By (initial): \_\_\_\_\_ Date: \_\_\_\_\_

**III. Environmental Facilities and Services Administration Review:**

Permit Form Required (Y/N): \_\_\_\_\_ Parcel Review Required (Y/N): \_\_\_\_\_ Inspection Required (Y/N): \_\_\_\_\_

Connection/Reconnection Fee Required (Y/N): \_\_\_\_\_

Release Permit Form (Y/N): \_\_\_\_\_; If Yes, Permit Form Release Date: \_\_\_\_\_, Permit Number \_\_\_\_\_,

Number of Units \_\_\_\_\_, Billing Type (A, B or C): \_\_\_\_\_; If No then Comment: \_\_\_\_\_

Void Existing Permit (Y/N): \_\_\_\_\_; If Yes, Date to Void Existing Permit: \_\_\_\_\_.

Comments: \_\_\_\_\_ Reviewed By (initial): \_\_\_\_\_ Date: \_\_\_\_\_