

**Town of Auburn, Massachusetts  
Department of Public Works  
Sewer Division**

Julie A. Jacobson  
Town Manager

Joanna E. Paquin  
Director



Nicholas S. Schwartz  
Assistant DPW Director  
Sewer Superintendent

## **Sewer Connection Permit Requirements**

- Permits will only be issued to drainlayers that are licensed in the Town of Auburn that have provided up-to-date insurance and bond documents.
- A Trench Permit and a Road Opening Permit (as applicable) must be obtained from the DPW office prior to the start of any work
- All necessary approvals from the Board of Health shall be obtained for the abandonment of septic tanks or cesspools, as applicable. The Board of Health can be reached at 508-832-7703
- The Sewer Connection permit must be signed by the property owner and licensed drainlayer prior to permit approval.
- Payment for sewer connection and permit fees must be included with the Sewer Connection Application
- The permit must be kept on-site at all times.
- A fully completed Sewer Connection Permit and as-built sketch must be returned to the Sewer Division Office within 7 days of completion of the work
- An as-built sketch, prepared by the licensed drainlayer performing the work, must be provided, and shall include the following:
  - Swing ties to building connection, bends, cleanouts, and sewer lateral/main connection
  - Invert elevations at building connection, sewer lateral/main connection, and bends (top of foundation to be used as benchmark)
  - Location of the water service relative to sewer connection

5 Millbury Street  
Auburn, MA 01501  
Telephone: (508) 832-7811  
Fax: (508) 832-2173  
Email: [nschwartz@town.auburn.ma.us](mailto:nschwartz@town.auburn.ma.us)  
Web site: [www.auburnguide.com](http://www.auburnguide.com)

TOWN OF AUBURN  
APPLICATION FOR PERMIT

TO CONSTRUCT AND/OR CONNECT A PRIVATE SEWER TO THE PUBLIC  
SEWER  
FOR RESIDENTIAL OR COMMERCIAL SERVICE

OWNER \_\_\_\_\_ DATE \_\_\_\_\_

ADDRESS \_\_\_\_\_ DIG SAFE# \_\_\_\_\_

( ) RESIDENTIAL NUMBER OF FAMILY UNITS \_\_\_\_\_ NUMBER OF BEDROOMS \_\_\_\_\_  
( ) COMMERCIAL TYPE OF BUSINESS \_\_\_\_\_

LIST ALL FIXTURES TO BE CONNECTED TO PROPOSED BUILDING SEWER:

\_\_\_\_ SINKS, TUBS, LAVATORIES      \_\_\_\_ URINALS      \_\_\_\_ GARBAGE GRINDERS  
\_\_\_\_ TOILETS      \_\_\_\_ SHOWERS      \_\_\_\_ OTHER \_\_\_\_\_  
EST. TOTAL FLOW      GPD

MAXIMUM NUMBER OF PERSONS WHO WILL USE ABOVE FIXTURES \_\_\_\_\_

I have contracted with \_\_\_\_\_ (licensed drainlayer)  
to complete this work and authorize this application in my name by said drainlayer. I agree to comply with all lawful Regulations,  
present and future, for the use of the public sewer system. By signing this application, I verify that all existing domestic plumbing fixtures will  
be connected to the Town's sanitary sewer system.

\_\_\_\_\_  
Signature of Owner

Connection Fee: \_\_\_\_\_

Permit Fee: \_\_\_\_\_ Date Rec'd.: \_\_\_\_\_ By: \_\_\_\_\_

PERMIT GRANTED - subject to the following restrictions: PER DEPARTMENT REGULATIONS

\_\_\_\_\_  
By: Nicholas S. Schwartz, Superintendent

**--THIS PERMIT MUST BE AVAILABLE AT JOB SITE AT ALL TIMES--**  
**THE COMPLETED PERMIT, (including all signatures and asbuilt), MUST BE RETURNED TO THE SEWER**  
**OFFICE WITHIN 7 DAYS OF COMPLETION OF JOB. THE PROJECT MUST COMMENCE WITHIN 60 DAYS**  
**OR PERMIT WILL BECOME VOID.**

Total # of Feet of Pipe Installed and Size: \_\_\_\_\_

I CERTIFY THAT THIS WORK HAS BEEN COMPLETED BY ME AS SHOWN IN THE SKETCH ABOVE (OR ATTACHED PLANS) AND IN  
ACCORDANCE WITH ALL APPLICABLE REGULATIONS AND ALSO CERTIFY THAT ALL EXISTING INTERIOR DOMESTIC PLUMBING FIXTURES  
HAVE BEEN CONNECTED TO THE TOWN'S SANITARY SEWER SYSTEM.

\_\_\_\_\_  
SIGNATURE OF DRAINLAYER

Work Inspected & Approved by: \_\_\_\_\_ Date \_\_\_\_\_

FINAL SEWER CONNECTION APPROVAL: \_\_\_\_\_ Date \_\_\_\_\_

Nicholas S. Schwartz, Superintendent

Connection # \_\_\_\_\_