



Tax Parcel # _____

Date _____

NEW SEWER CONNECTION PERMIT APPLICATION

Fee: \$250 (Residential) / \$500 (Non-Residential)

Fee Due Upon Permit Submittal

Willistown Township

688 Sugartown Road

Malvern, PA 19355

Phone 610.647.5300

Email permits@willistown.pa.us

Property Address to be Connected:

Address _____ City _____ State _____ Zip _____

Print Name _____ Telephone Number _____

Email _____

Contractor Information:

Name of Company _____

Address _____ City _____ State _____ Zip _____

Print Name _____ Telephone Number _____

Email _____

Type of Connection:

Residential – single family Residential – multi-family Non-Residential

Sewer District:

Acres East Central Sugartown Road Penns Preserve Other

Sewer Tapping Fees:

Sewer Tapping Fees are to be paid prior to permit issuance. Please refer to the approved Fee Schedule for the amount owed for sewer tapping fees. If you have questions, please call the Township directly.

Proposed Usage:

Estimated total daily flow in gallons per day (GPD)* _____

*residential usage will be 250 GPD per dwelling unit

Sewer Conveyance Type:

Gravity Low Pressure

Water Supply:

Public Well/On-site

Road Occupancy:

Sewer connection permits made within road rights-of-way require an approved Road Occupancy permit. Please check one of the following below.

Township Road Occupancy Permit included with this application

PennDOT Road Occupancy Permit included with this application

Sewer connection not within road right-of-way

Attach the Following:

1. Site plan showing the proposed sewer line, including length and depth.
2. Sewer connection details spec sheet (examples attached).

3. Product sheet for the low pressure sewer grinder pump, if applicable.
4. Signed copy of the contract for services between Owner and Contractor.

I understand, and agree to the following:

- Contractor, whose name is set forth above, on behalf of Owner, whose name is set forth above, hereby makes application for a permit to construct a sanitary building sewer for the property, whose address is set forth above, and to connect to the Township sanitary sewer system.
- Owner and Contractor both hereby certify that they have read or are familiar with the Ordinances of Willistown Township and the Rules and Regulations of the Sewer Department of Willistown Township and particularly the regulations pertaining to construction and connection of sanitary building sewers.
- Owner and Contractor both understand that NO WORK IS TO BE COVERED UNTIL INSPECTED, TESTED, AND APPROVED and that NO CONNECTION IS TO BE MADE UNTIL PERMISSION IS GRANTED.
- The registered Master Plumber signing this application certifies that the information contained herein is true and correct to the best of their knowledge, information, and belief and that they have taken all reasonable steps to verify the accuracy hereof.
- Owner and Contractor acknowledge that the following items have been addressed in the contract for the installation of the service lateral: proper abandonment of the existing on-lot sewage disposal system in accordance with Township regulations and restoration in accordance with the minimum requirements which are raking, seeding, and mulch over the service connection trench.
- Owner and Contractor acknowledge that, if a sewer grinder pump is needed, the following items have been addressed in the contract for the installation of the sewer grinder pump: proper compaction in accordance with the specifications and requirements of the manufacturer, electricity connection, and telephone connection.

Property Owner's Signature _____
 Print Name _____

Contractor's Signature _____
 Print Name _____

Master Plumber's Signature _____
 Print Name* _____

*must match the information on the required plumbing permit

***All inspections must be coordinated with the Township.**

Please do NOT write below this line

Permit # _____ Date Issued _____ Amount Paid \$ _____

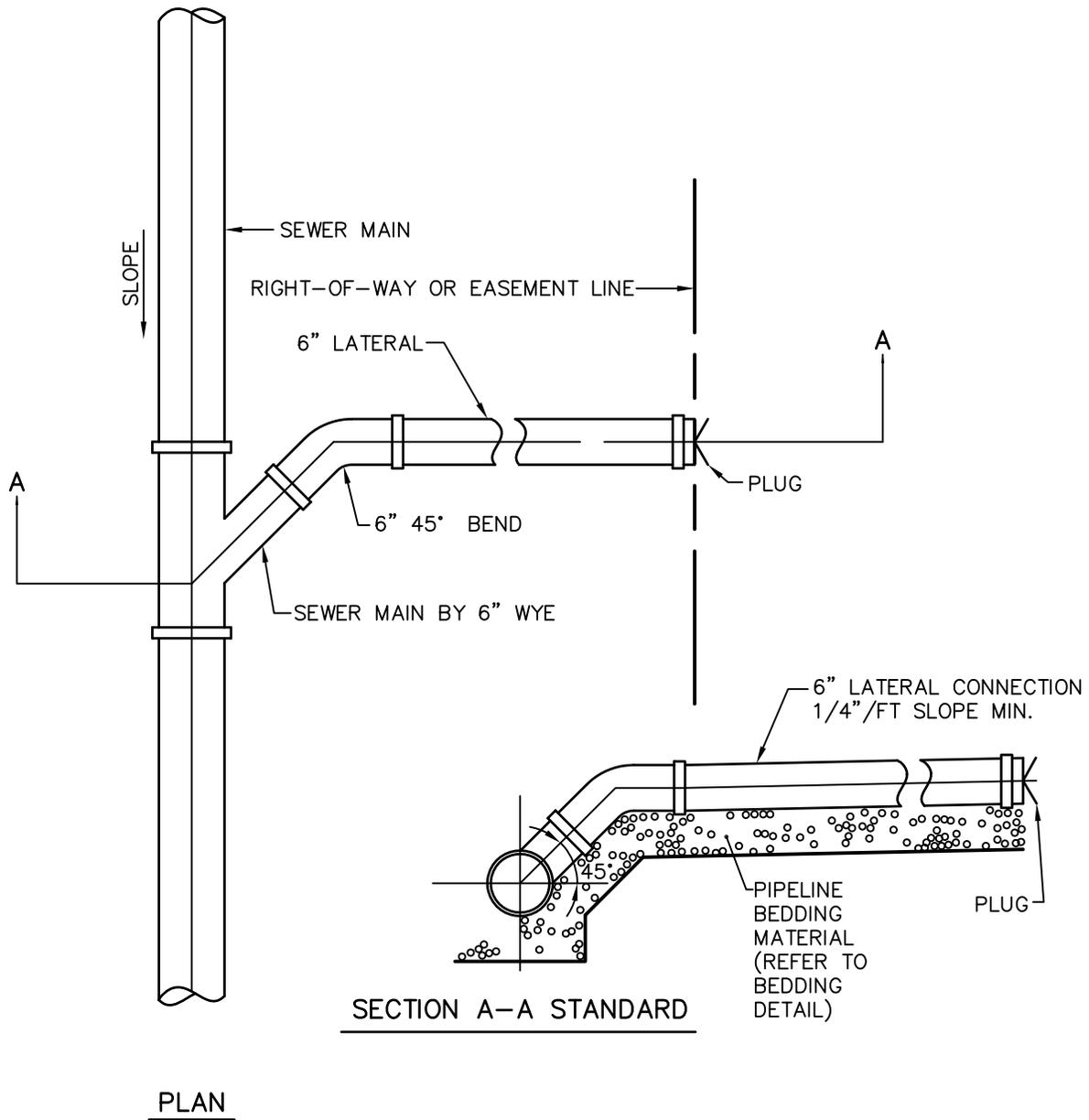
Code Administration Officer _____ Date _____

Approved Not Approved Reason for Disapproval _____

Pipe Tested and Approved _____ Date _____

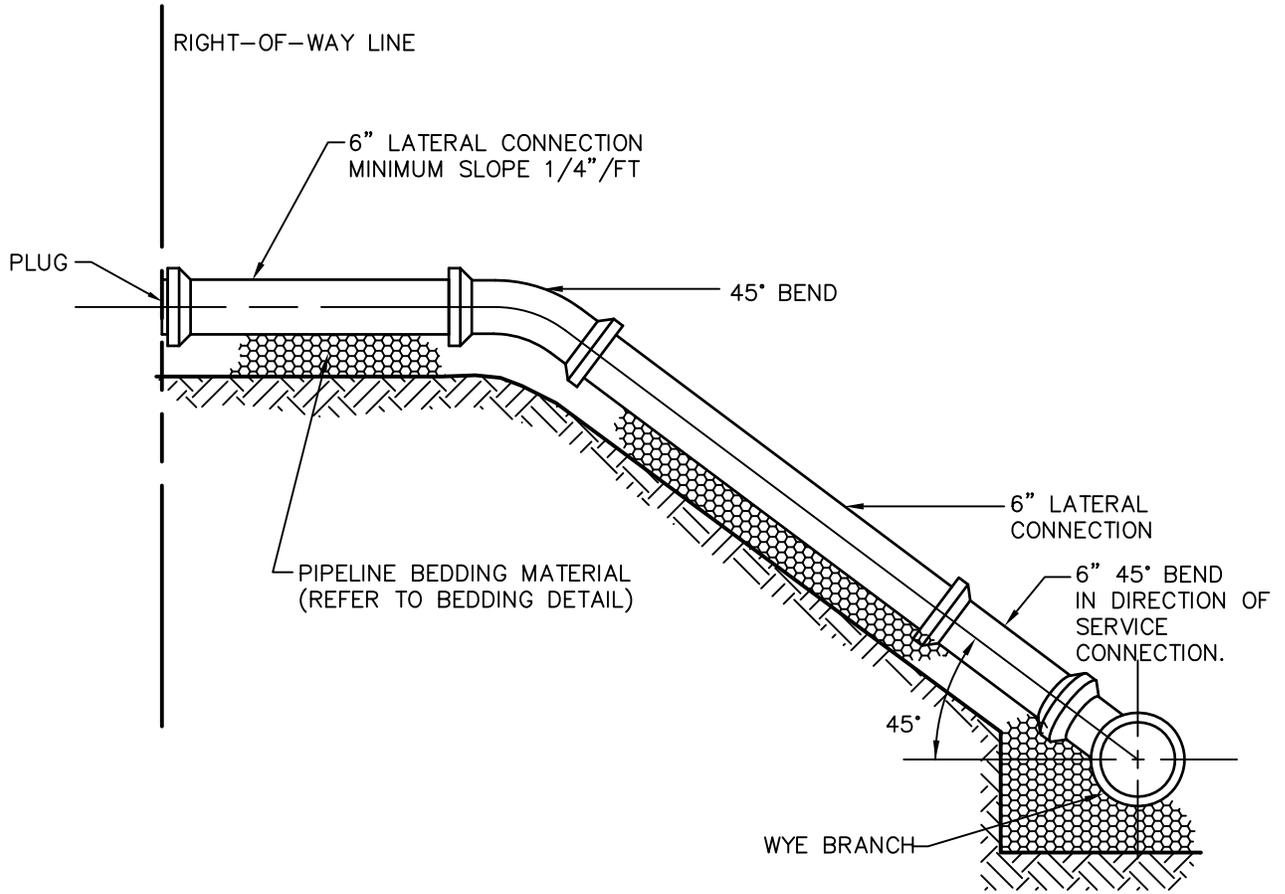
Final Inspection-Connection Authorized _____ Date _____

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WILLISTOWN TOWNSHIP			
DSG. BY: MTY		CKD. BY: WNM	
DATE: 2-24-14 SCALE: NONE			
REVISION		DATE	
STANDARD LATERAL CONNECTION			
STANDARD DETAIL S8			

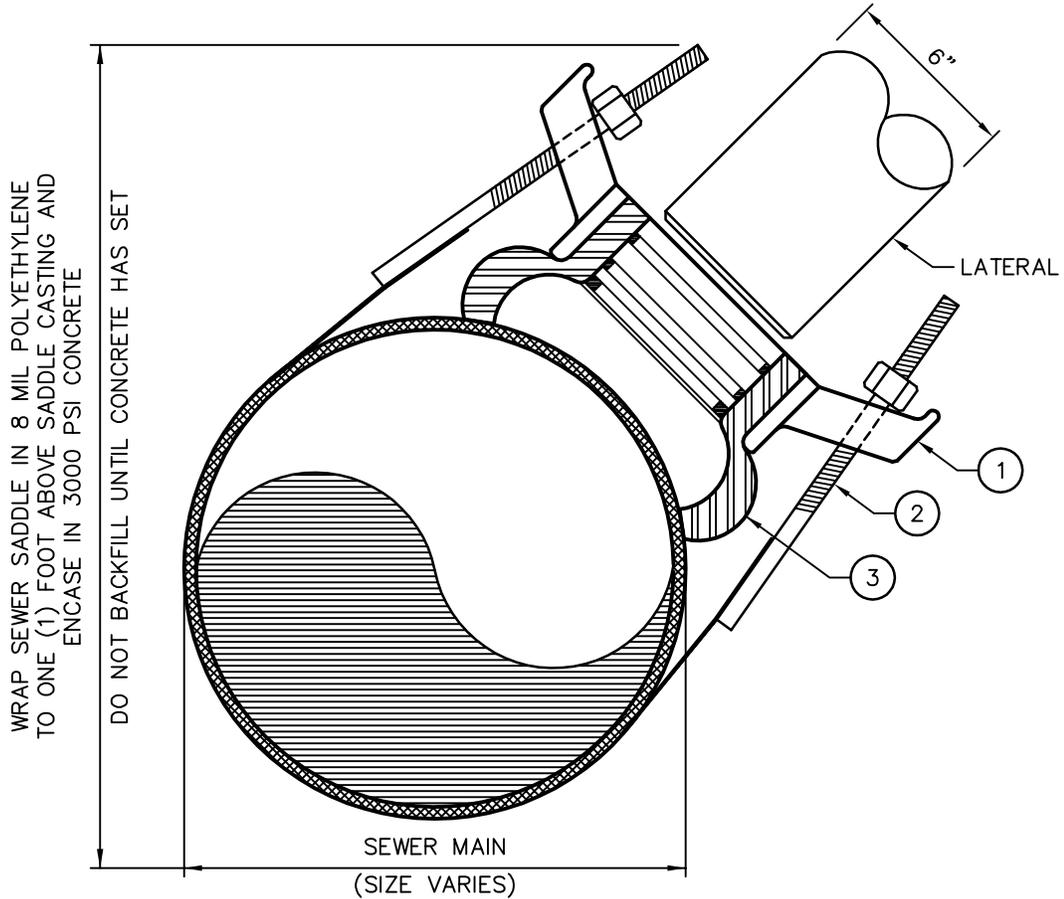
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ELEVATION

WILLISTOWN TOWNSHIP			
DSG. BY: MTY		CKD. BY: WNM	
DATE: 2-24-14 SCALE: NONE			
REVISION	DATE	DEEP LATERAL	
		STANDARD DETAIL S9	

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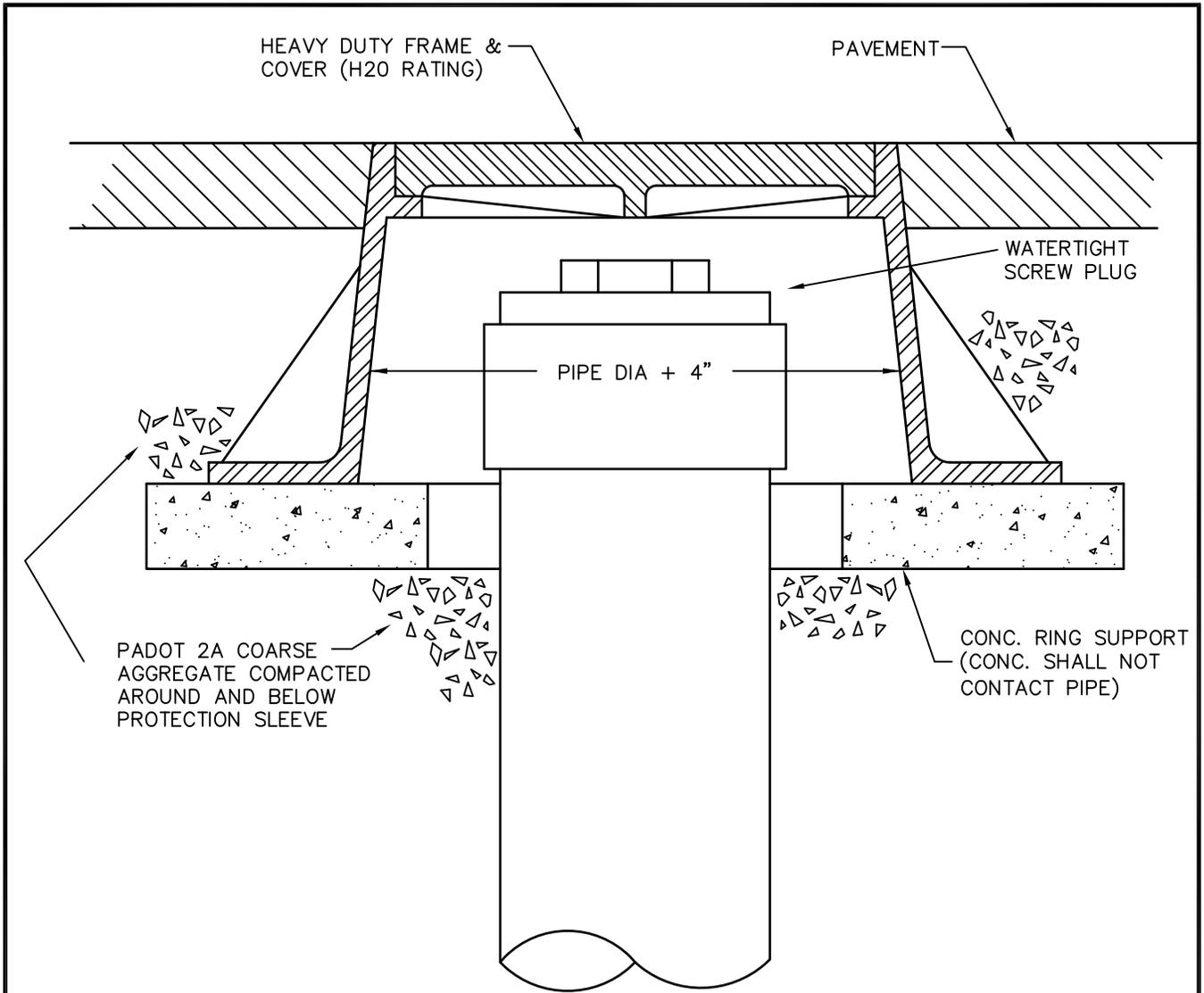


NOTES:

MATERIALS:

1. SADDLE CASTING: DUCTILE IRON ASTM 536-80 GRADE 65-45-12 PROTECTED WITH CORROSION RESISTANT PAINT.
2. STAINLESS STEEL 304 ADJUSTABLE STRAP: BOLTS, NUTS AND WASHERS 1/2" N.C. ROLL THREAD TEFLON COATED. 3 1/2" WIDE BAND TO SPREAD CLAMP FORCE OUT ON PIPE.
3. GASKET: VIRGIN SBR COMPOUNDED FOR SEWER SERVICE. MEETS ASTM D-2000 3 BA715.
4. STYLE CB SEWER SADDLE MANUFACTURED BY: ROMAC INDUSTRIES, INC.
5. SADDLE CAN BE INSTALLED BETWEEN 10:00 AND 2:00 POSITION ON THE EXISTING MAIN.

WILLISTOWN TOWNSHIP		SEWER SADDLE CONNECTION
DSG. BY: MTY	CKD. BY: WNM	
DATE: 2-24-14 SCALE: NONE		STANDARD DETAIL S16
REVISION	DATE	



PADOT 2A COARSE AGGREGATE COMPACTED AROUND AND BELOW PROTECTION SLEEVE

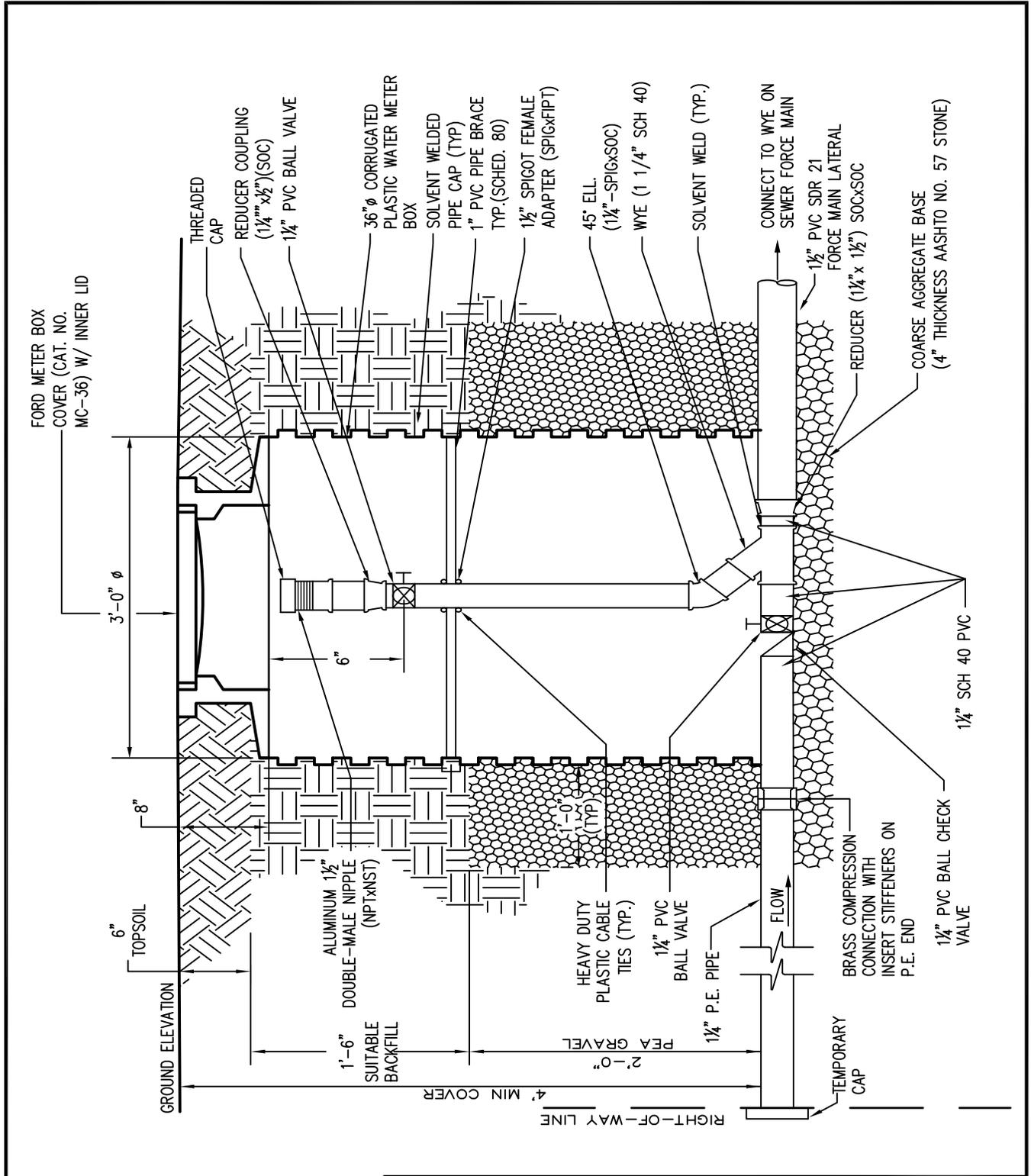
CONC. RING SUPPORT (CONC. SHALL NOT CONTACT PIPE)

NOTES:

1. FRAME AND COVER SHALL BE NEENAH FOUNDRY COMPANY MODEL R-1976 OR APPROVED EQUAL
2. CLEAN-OUT PROTECTION SLEEVES ARE TO BE INSTALLED FOR CLEAN-OUTS LOCATED IN PAVED AREAS, OR LESS THAN 3 FEET FROM A PAVED AREA.

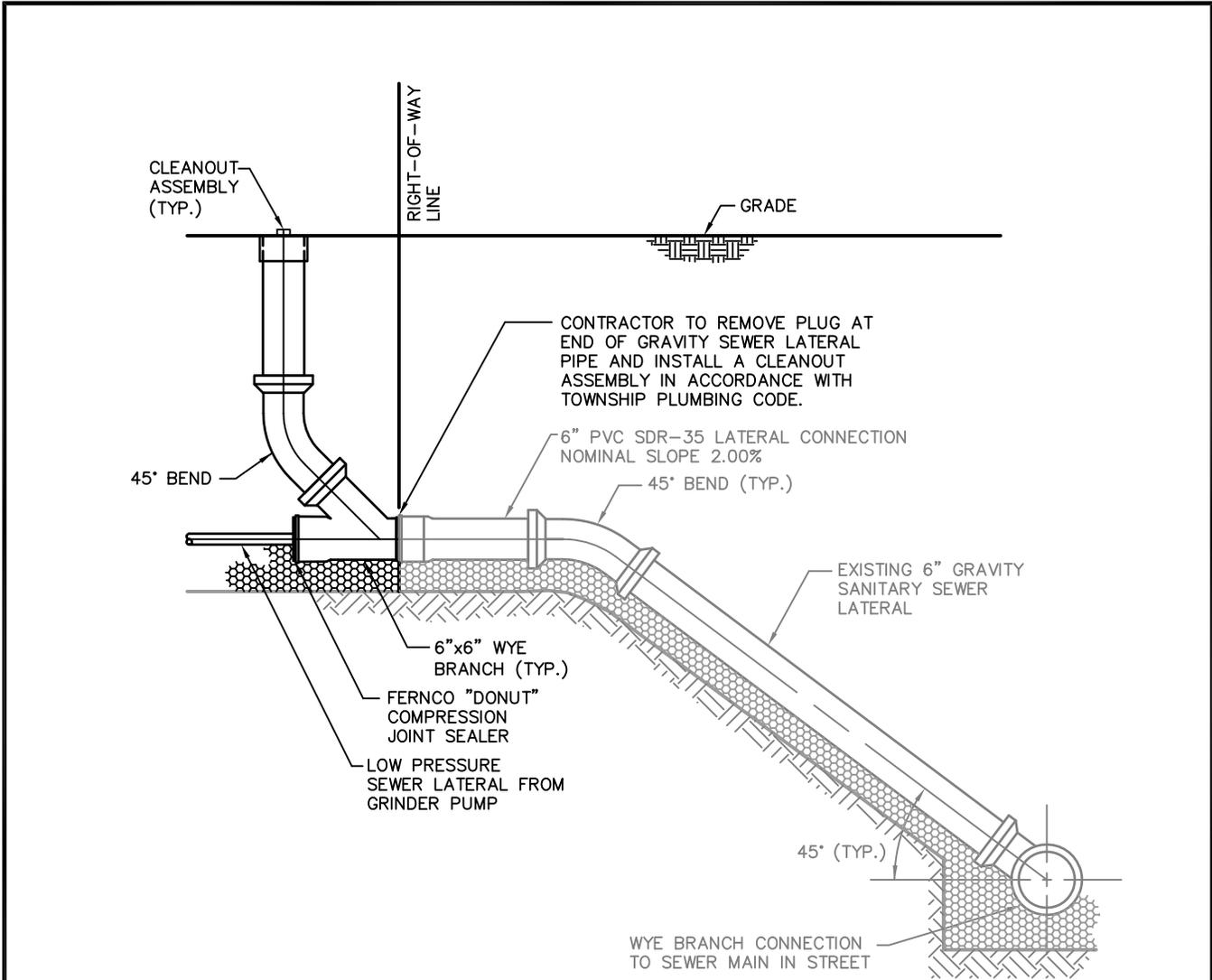
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WILLISTOWN TOWNSHIP	
DSG. BY: MTY CKD. BY: WNM	CLEAN-OUT PROTECTION SLEEVE
DATE: 2-24-14 SCALE: NONE	
REVISION	DATE
STANDARD DETAIL S17	



WILLISTOWN TOWNSHIP	
DSG. BY: MTY	CKD. BY: WNM
DATE: 2-24-14 SCALE: NONE	
REVISION	DATE
TYPICAL SECTION THROUGH PRESSURE SEWER LATERAL CONNECTION PIT	
STANDARD DETAIL S19	

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ELEVATION

NOTES:

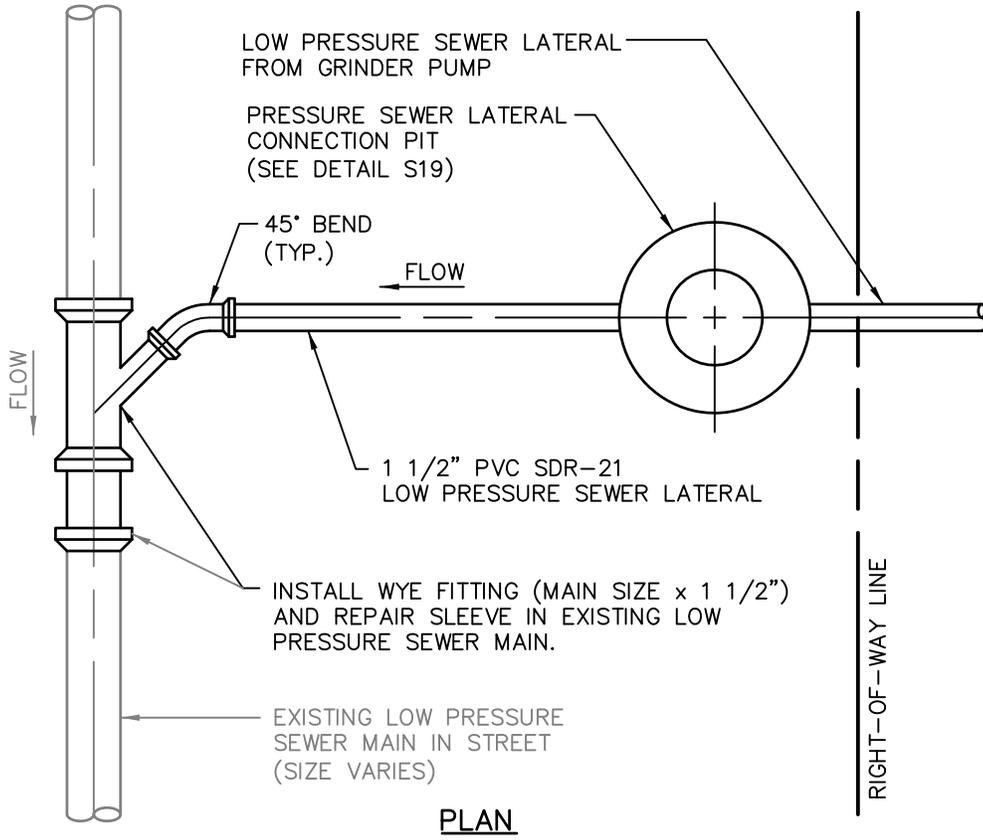
1. CONTRACTOR TO OBTAIN ALL TOWNSHIP APPROVALS PRIOR TO MAKING CONNECTION TO EXISTING GRAVITY SANITARY SEWER LATERAL.
2. INSTALLATION OF LOW PRESSURE SEWER LATERAL AND GRINDER PUMP SHALL BE IN ACCORDANCE WITH TOWNSHIP PLUMBING CODE.

TYP. LPSS CONNECTION TO GRAVITY SANITARY SEWER LATERAL

NTS

WILLISTOWN TOWNSHIP	
DSG. BY: MTY	CKD. BY: WNM
DATE: 2-24-14 SCALE: NONE	
REVISION	DATE
TYPICAL LOW PRESSURE SEWER LATERAL CONNECTION TO GRAVITY SANITARY SEWER LATERAL	
STANDARD DETAIL S23	

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PLAN

NOTES:

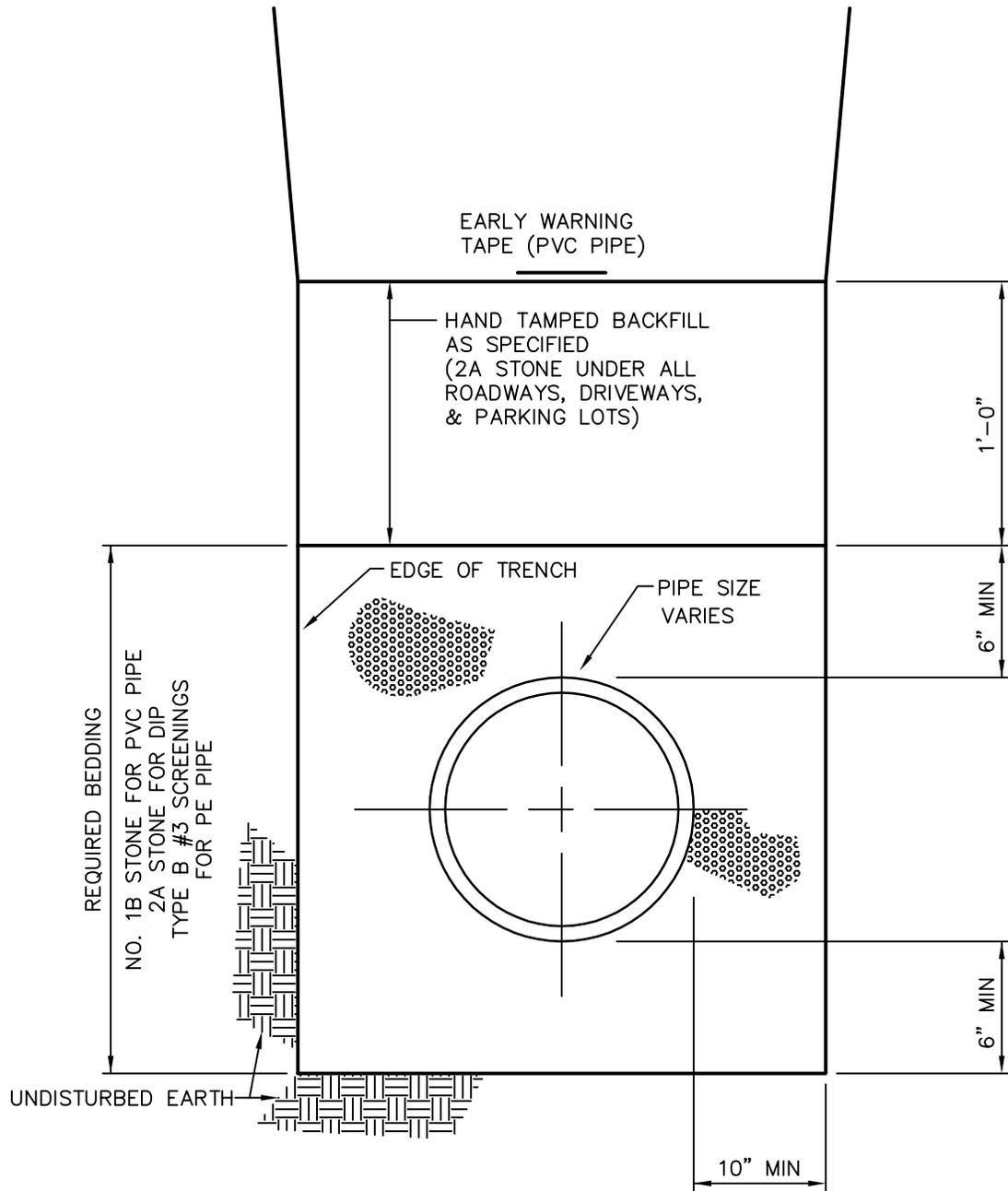
1. CONTRACTOR TO OBTAIN ALL TOWNSHIP APPROVALS PRIOR TO MAKING CONNECTION TO EXISTING LOW PRESSURE SEWER MAIN.
2. INSTALLATION OF LOW PRESSURE SEWER LATERAL AND GRINDER PUMP SHALL BE IN ACCORDANCE WITH TOWNSHIP PLUMBING CODE.

LOW PRESSURE SEWER LATERAL CONNECTION TO EXISTING LOW PRESSURE MAIN

NTS

WILLISTOWN TOWNSHIP		LOW PRESSURE SEWER LATERAL CONNECTION TO EXISTING LOW PRESSURE MAIN
DSG. BY: MTY CKD. BY: WNM		
DATE: 2-24-14 SCALE: NONE		
REVISION	DATE	STANDARD DETAIL S24

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WILLISTOWN TOWNSHIP	
DSG. BY: MTY	CKD. BY: WNM
DATE: 2-24-14 SCALE: NONE	
REVISION	DATE
PIPE BEDDING	
STANDARD DETAIL M1	