TOWN OF MEDWAY
DEPARTMENT OF PUBLIC SERVICES
MEDWAY, MASSACHUSETTS

*Entrusted To Manage The Public Infrastructure*

# Water Service Permit Application

**Office Use only**

| | | |
|---|---|---|
| **Water Permit Fee $ _____** | **Permit #_____** | **Exp. Date _____** |

**Renewal/Replace = $100 permit fee**
**New Service w/ Septic = $100 fee + $250 meter + Entrance Fee ($1050 – 1", $1400 - >1")**
**New Service w/ existing Town Sewer = $100 fee + Entrance Fee ($1050 – 1", $1400 - >1")**

*Permit Applications require at least two business days to process. No work is allowed until permit is granted. Permit must be on site at all times.*

Type (check one): ☐ Renewal/Replace Service ☐ New Service ☐ Cut/Cap ☐ Repair

**Service Address:** _____

Applicant Name _____ Tel# _____

Applicant Address _____

Property Type (check one): ☐ Residential ☐ Commercial

Number of persons/bedrooms _____

Contractor Name _____ Tel# _____

Company Name _____ **Drain Layer License** #_____

Contractor Address _____

**Water Layout sheet for the property is attached and shall be submitted to our agent with the as-built drawing when the inspection is performed.**

In consideration of granting this permit the undersigned agrees:

1. To accept and abide by all provisions of the Rules and Regulations of Medway Board of Water/Sewer Commissioners, and of all other pertinent ordinances or regulations that may be adopted in the future. The Medway Board of Water/Sewer Commissioners shall license the person or firm who will perform the work.
2. To notify the Water & Sewer Superintendent **48** hours before construction, also when water service is ready for inspection and connection to the public system, but before any portion of the work is covered.
3. All connections within the building and to a point 10 feet outside of the building shall meet the requirements of the Massachusetts State Plumbing Code. All piping beyond **10** feet up to the property line (curb stop) shall meet AWWA standards. All piping within the Town right of way shall be Copper or C.L.D.I pipe on all buildings.
4. Permit is valid until expiration date, fee is not refundable.

The contractor shall conform to all regulations and the Board or their agents may make any additional requirements as necessary. Failure to conform shall void application.

Applicant Signature _____ Date _____

**DPS Signature** _____ **Date** _____

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# Water Service Layout/Profile

- All connections within the building and to a point 10 feet outside of the building shall meet the requirements of the Massachusetts State Plumbing Code. All piping beyond **10** feet up to the property line (curb stop) shall meet AWWA standards. All piping within the Town right of way shall be Copper or C.L.D.I pipe on all buildings.
- By State Law, Dig-Safe must be contacted at least 72 business hours in advance of all non-emergency work in order to have all public utilities marked clearly. For all emergency work, Dig-Safe must be contacted within 2 hours of the start of work.
- **24**-hour notice is required for inspections. Do not backfill until after inspections are complete.
- Service connection to be shown on plan below with measurements.
- **This plan will be completed and submitted to the inspector at the time of inspection. If not complete you may be subject to penalties and fines.**

**Service Address** _____ **Permit #**_____

*Include street location on diagram*

*Include all measurements and ties to building*

*Building*

Date Completed: _____

Pipe Size _____ Inch

(If more than one size, submit a detailed plan/drawing.)

Copper _____ Ft.

C.L.D.I. _____ Ft.

Plastic _____ Ft.

**Total Length _____ Ft.**

Depth @ Bldg. _____ Ft.

Depth @ Street _____ Ft.

Fittings _____

_____

_____

Slope of Pipe _____

Contractor Signature _____ Date _____

**DPS Inspector Signature** _____ **Date** _____