

**KITSAP COUNTY PUBLIC WORKS Sewer Utility Division
Application to Construct Sanitary Sewer**

The undersigned, hereinafter referred to as "Applicant", hereby makes application to Kitsap County for permission to connect to the County's sewage collection system in accordance with Kitsap County "Guidelines for Sanitary Sewer Extensions" and applicable ordinances.

Owner/Agent Signature Date

Project Name:_____

Site Address:_____

Owner Name: _____

Address:_____

City, State, Zip:_____

Phone No:_____

Contact Person: _____ Phone: _____

Engineer:_____

Address:_____

Contact Person:_____ Phone: _____

Legal description of the development:

Qtr: _____ Qtr: _____ Section: _____ Township: _____ Range: _____

Parcel Tax Assessor's Number(s):_____

TYPE OF USE

Single Family Dwellings - number of lots _____

Multiple Family Dwellings/Hotel/Motel/ - number of units _____

Commercial Office/Retail Building - square footage _____

Restaurant/Tavern/Theater - seating capacity _____

School/Day Care - number of students _____