

TOWN OF BATAVIA
WATER & SEWER SERVICE APPLICATION
~ INSTRUCTION SHEET ~

A. APPLICATION - NO WORK SHALL START BEFORE APPLICATION IS APPROVED

1. All "Water & Sewer Service Applications" must be filled in completely and returned to the Town Clerk's office.
2. Connection Fees are site specific and will be determined by the Town Clerk's office.
3. All fees must be paid in full before your application is approved.
4. Homeowners who will be performing their own work must provide proof of homeowners insurance, as required, in the amount acceptable to the Town.
5. Contractors hired to perform the work must provide evidence of the existence of a performance bond and liability insurance (and the existence of a performance bond if a commercially sized service) and, as required, in the amount acceptable to the Town and shall name the Town of Batavia as additional insured.
6. Non-residential properties must submit plans indicating the size, material, length, and location of the proposed service line.
7. Agricultural properties that believe they are eligible to receive the agricultural rate must submit an Agricultural Water Rate Request Form (see the form for eligibility requirements).

B. NEXT STEPS OF APPLICATION APPROVAL

1. Your application will be reviewed by the Town of Batavia Water/Wastewater Department.
2. The Owner will either receive an approved application or will be contacted if adjustments are required to the proposed service line design.
3. You or your contractor may install the water service in accordance with the approved service application and the Town of Batavia standard service handouts.
4. Contact the **Water/Wastewater Department** at **585-356-4900** to schedule an inspection.
5. You will be informed at the time of the inspection when your service will become live.

C. CONSTRUCTION

1. One or more handouts will be provided by the Town Clerk's office upon submission of the "Water & Sewer Service Application." All work must be completed in accordance with these handouts (or per a design done by a licensed design professional), and/or, as approved by the Town of Batavia.
2. All work must be in compliance with the New York State Plumbing Code, the New York State Department of Health (NYSDOH), and the requirements of the Town of Batavia.
3. Utility providers must be notified, and their lines located prior to any excavation (digging) by law. Owner/Contractor must call **Dig Safely New York** at least two (2) working days prior to any ground breaking by dialing **811**.
4. Sewer pipe must be at least ten (10) feet from any water line. Said pipe and installation, both outside the structure and within, must be in full compliance with the Plumbing Code of New York State and with the requirements of the Town of Batavia.
5. A Trench Inspection prior to backfilling and an Interior Inspection are both required by the Town of Batavia. Twenty-four (24) hours advanced notice is required to schedule these inspections.

Direct questions to: Water/Wastewater Department, at (585) 356-4900

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D. SPECIAL DESIGN CRITERIA: WATER SERVICES

1. Any existing or potential condition within, or affecting your plumbing system, or any water use, or auxiliary water source that may create a hazard to the Public Water Supply will require elimination, isolation, or containment protection by the installation of a Cross Connection Control Containment Device per the requirements of the New York State Department of Health (NYSDOH), New York State Plumbing Code, and the Town of Batavia. All work must be inspected by the Town of Batavia. See the NYS Dept. of Health “Individual Water Supply Wells – Fact Sheet #4” for guidance on decommissioning abandoned wells.
2. Well(s) must be disconnected from any plumbing connected to the Public Water System, or separated by installing a NYSDOH Approved Backflow Prevention Device to protect the Public Water Supply, or by permanently abandoning the well/auxiliary water supply per the Town of Batavia and NYSDOH Well Abandonment and other guidelines (to include the removal of items within the well casing). All work must be inspected by the Town of Batavia.
3. Any electrical that has used metal well lines for grounding must be re-grounded to a new appropriate grounding electrode. The public water service line to be run to your structure is plastic and will not conduct electricity, making it ineffective and unsafe for electrical grounding.
4. If a Back Flow Device is needed – you must contract with a Licensed Professional Engineer for the design and application of the device **OR** the Town of Batavia offers this service (see Backflow Connection Application).

E. DEFINITIONS

- *Agent* – A third party hired by the property owner to manage the utility connection (ie. contractor or engineer). Property owners are not required to hire an agent but if a third party is the main point of contact, the Agent Contact Information section of the application must be completed.
- *Combined Service* – a single service line that provides both domestic and fire service to the property.
- *Domestic Service* – a service line that will provide water for sanitary uses only (drinking water, showers, toilets, etc...)
- *Fire Service* – a service line that will provide water only for a designated private fire protection system.

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Owner Property Information

SWIS Number: _____ Tax Parcel Number: _____
 Service Address: _____ City: _____ Zip: _____
 Owner Name: _____ Phone Number: _____
 Billing Address: _____ City: _____ Zip: _____
 Email Address: _____
 Property Type: Residential Commercial/Industrial Agricultural Other: _____

Please indicate the number of each fixture in the structure(s) to be served:

| <u>Fixture</u> | <u>Count</u> | <u>Fixture</u> | <u>Count</u> | <u>Fixture</u> | <u>Count</u> |
|---|--------------|------------------|--------------|---------------------|--------------|
| Toilet | | Bathroom Sink | | Dishwashing Machine | |
| Urinal | | Kitchen Sink | | Washing Machine | |
| Bath/Shower | | Mop Sink; Spigot | | Drinking Fountain | |
| Please list unique/additional fixtures (ie. yard hydrant)?: _____ | | | | | |

Agent Contact Information

Project Contact: _____ Phone Number: _____
 Contact Address: _____ City: _____ Zip: _____

Water Service Request

Are you requesting water service? Yes No *(If yes, please complete the remainder of this section)*
 What is the service use? Domestic Fire Service Combined
 Will your private well remain in service? Yes No
 What is the maximum flow required? *(non-residential only)*: _____ gal./day & _____ gal./minute

Sewer Service Request

Are you requesting sewer service? Yes No *(If yes, please complete the remainder of this section)*
 Is an Industrial Discharge Permit required per §191-21 of the Town Code? Yes No
 What is the maximum sewer discharge? *(non-residential only)*: _____ gal./day & _____ gal./minute

Applicant Agreement

In consideration of the granting of this permit, the undersigned agrees to accept and abide by all provisions in the Town Water and Sewer Usage Ordinances of the Town of Batavia and any amendments as may be, or have been, adopted from time to time, and all other pertinent ordinances or regulations that may be adopted in the future.

Applicant Signature: _____ Date: _____

Please return completed application to the Town Clerk's Office where:

1. you will identify the location of your new service along with existing private utilities (e.g. sewer, septic, & leach lines); and
2. your Connection Fee will be determined.

THIS PAGE IS FOR TOWN OF BATAVIA USE ONLY

Approval

_____ is hereby approved to for a public _____ service
at the following address: _____. The connection fee is \$_____
and the recommended service size is _____ inches.

Approval Date: _____ Reviewer's Signature: _____

Date Called: _____ Notes (if applicable): _____

~ Please reference the WATER & SEWER SERVICE APPLICATION INSTRUCTION SHEET for information regarding
construction and inspection ~

Clerk's Office

*Print Sketch & include: new service, existing utilities, labels.
Ensure applicant has obtained the appropriate water/sewer handouts.*

Date Fee Paid: _____ Date Proof of Insurance Received: _____

Account Number: _____

Input: Lat/Long Muni Category Res/Comm Category PWS Category MMzone Category

Attachments

- | | |
|--|---|
| Sketch Printout Attached? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A | Backflow App. Attached? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A |
| Service Sizing Sheet Attached? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A | Smart Growth App. Attached? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A |
| Wtr Acct Prcl Report Attached? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A | Ag-Rate Request Attached? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A |
| I.R./Service Card Attached? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A | Other Attachments? _____ |