

**Billing: (845) 583-4350 ext. 17**  
**Billing Fax: (845) 583-0225**

**Kauneonga Lake Sewer District**  
**P.O. Box 340**  
**Kauneonga Lake, NY 12749**

**Michael Collins**  
**Sewer Superintendent**  
**Phone/Fax: (845) 583-5810**

### Sewer Connection Application and Permit

**For Office Use Only:**

**Application Fee: \$ \_\_\_\_\_ Date Paid: \_\_\_\_\_ Cash: \_\_\_\_\_ Check No.: \_\_\_\_\_**

Section \_\_\_\_\_ Block \_\_\_\_\_ Lot \_\_\_\_\_

The applicant hereby applies for a permit to make sewer connection for the property located at:

\_\_\_\_\_  
*(physical address of property to be connected)*

and agrees to comply with all applicable ordinances, local laws, rules and regulations.

All connections must meet the regulation contained in the Town of Bethel Code Chapter 257 and must be inspected by the Town before backfilling or the connections will be in violation.

Owner's Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Contractor's Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Dated: \_\_\_\_\_

\_\_\_\_\_  
Applicant's Signature

Dated: \_\_\_\_\_

Permit Approved: \_\_\_\_\_  
Sewer Superintendent

Permit is hereby granted for making public sewer connection in accordance with above application.

**For Office Use Only:**

**Units: \_\_\_\_\_ Seasonal: \_\_\_\_\_ Year-Round: \_\_\_\_\_ Quarterly Billing Charge: \$ \_\_\_\_\_**