

# Application to Connect to the City of West Branch Water and Sewer Systems

*(Permit also required from the Ogemaw County Building & Zoning Department)*

## Applicant Information/Mailing Address

*Individual Home Owner or Corporate Name*

\_\_\_\_\_(\_\_\_\_\_)\_\_\_\_\_  
Last First M.I. Phone umber

\_\_\_\_\_  
Street City State Zip

\_\_\_\_\_  
65-052-  
Property ID #

\_\_\_\_\_  
Driving Directions/Major Cross Roads

## Connection Location/Service Address/Job Location

\_\_\_\_\_  
Street City State Zip  
West Branch MI 48661

## Contractor Information

\_\_\_\_\_  
Name License # Exp. Date

\_\_\_\_\_  
Street City State Zip

\_\_\_\_\_  
(\_\_\_\_\_)\_\_\_\_\_  
Phone Federal Employer ID Number

\_\_\_\_\_  
Workers Compensation Carrier MESC Employer Number

\_\_\_\_\_  
Bond Status

## Type of Work

\_\_\_\_Sewer Tap      \_\_\_\_Water Tap      \_\_\_\_Water & Sewer Taps

## Source of Wastewater

Source of wastewater on:  Existing facility presently discharging to system  
(Attach copy of connection permit)

Existing facility not presently discharging to system  
(Attach narrative of wastewater disposal method)

Proposed or new construction

Type of facility:  Residential  Single Family  
 Multiple Family  # of units  # of building(s)

Commercial SIC Code \_\_\_\_\_

Description of commercial activity \_\_\_\_\_

\_\_\_\_\_

Industrial SIC Code \_\_\_\_\_

Description of industrial activity \_\_\_\_\_

\_\_\_\_\_

## Sewer Connection

### *Building Sewer*

Diameter of building sewer pipe: \_\_\_\_\_ Material building sewer pipe: \_\_\_\_\_

Slope (grade) of building sewer pipe: \_\_\_\_\_ Is building sewer:  existing – Age \_\_\_\_\_  
 Proposed Construction

### *Public Sewer*

Diameter of public sewer pipe: \_\_\_\_\_ Material public sewer pipe: \_\_\_\_\_

## Discharge and On-site Materials Characteristics

*This section to be completed by all non-resident applicants*

Type of discharge:

Process Wastewater  Uncontaminated Industrial Waste  Sanitary Wastewater

For **process Wastewater** – Indicate discharge levels, in parts per million, of the following:

\_\_\_\_\_ BOD \_\_\_\_\_ Phosphorous \_\_\_\_\_ Total Kjeldahl Nitrogen

\_\_\_\_\_ TSS \_\_\_\_\_ Oils & Grease

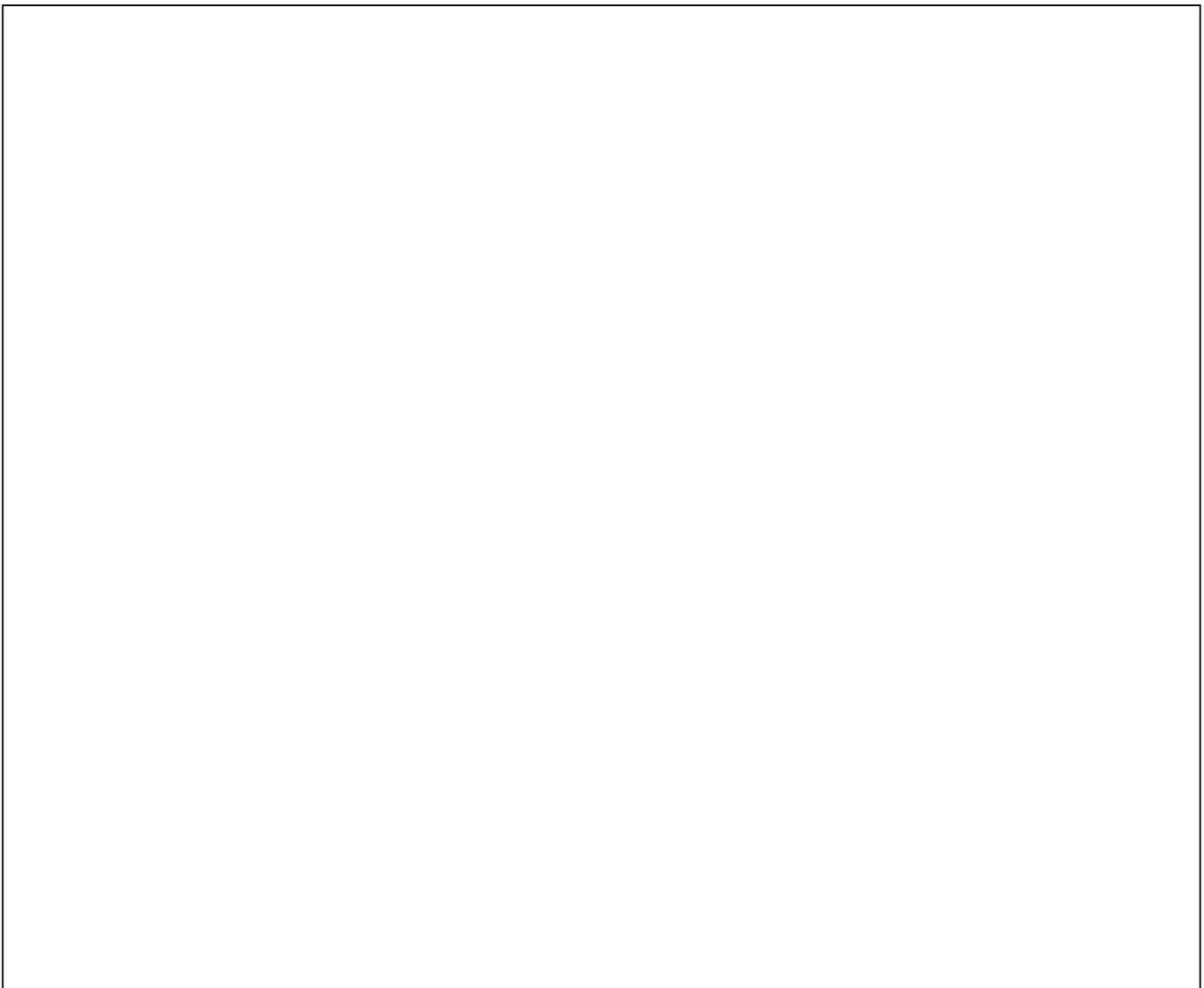
For **all** chemicals used or stored in this site, provide a description of their use(s) and method(s) of disposal. Include a copy of the Material Safety Data Sheet for each.

**Site Sketch**

\_\_\_ Residential single family, show in space provided below

\_\_\_ Residential multiple family, commercial or industrial, attach sketch on 8 ½ x 11 sheet or provide a site plan completed, signed and sealed by a registered professional engineer, licensed to practice in Michigan.

\_\_\_ Water    \_\_\_ Sewer    \_\_\_ Both



## Source of Water Supply

\_\_\_Municipal Water System

Is water use metered?(**water use must be metered**) \_\_\_yes \_\_\_no

Estimate of flow \_\_\_\_\_gallons per day

\_\_\_Private well or river source

Is water use metered? (**water use must be metered**) \_\_\_yes \_\_\_no

Estimate of flow \_\_\_\_\_gallons per day

## Water Connection

\_\_\_Residential \_\_\_Commercial \_\_\_Industrial

Size of Water Line\_\_\_\_\_

***You must pick up a meter from the City of West Branch Public Works Department and have it installed by a plumber.***

Are there any existing wells on the property? \_\_\_yes\* \_\_\_no

\*If the answer is yes, please notify the District Health Department No. 2 when the well has been properly plugged in accordance with Public Health Code, Act 368, P.A. 1978, Part 127.

## Industrial or Commercial Representative

One person from non-residential applicant shall be delegated by the applicant the authority to be responsible for wastes admitted to the municipal sewers. Such persons would be charged with maintaining the wastewater discharge operation and assuring a continual high level of performance.

Such person would be involved with the prevention of accidental discharges of process wastes admitted to the sanitary sewer system. Such person must become aware of all potential and routine toxic wastes generated by their industry. Such person must also be informed of all process alterations, which could, in any manner, increase or decrease normal daily flow or waste strength discharge to the sanitary sewers.

This industrial representative must catalog all chemicals stored, used, or manufactured by their industry. Such a listing should include specific chemical names, not manufacturer's codes. Those wastes admitted to the sanitary sewer are a prime concern; however, all discharges should be cataloged. An estimate of daily average flows and strengths must be made including process, cooling, sanitary, etc. Such a determination should separate the flows according to appropriate categories. The aforementioned flow and chemical listing is to be sent to the City of West Branch, 121 N 4<sup>th</sup> St, West Branch MI 48661.

The industrial representative shall determine whether or not large process alterations will occur during the next few years: one year, two years, and five years. Management should be consulted to determine if such alterations are scheduled and forthcoming.

I certify that I am familiar with the wastewater process at the location specified under the Connection Location/Service Address section on page 1. By signing this section I agree to the conditions specified above.

I hereby certify the work described on this permit application shall be installed in accordance with the State Plumbing Code and shall not be enclosed, covered up, or put into operation until it has been inspected and approved by the City/Township Inspector and the County Plumbing Inspector. I will cooperate with the City/Township Inspector and the County Plumbing Inspector and assume the responsibility to arrange for necessary inspections.

\_\_\_\_\_  
Name of Representative

\_\_\_\_\_  
Signature of Representative

\_\_\_\_\_  
Date

**Signature of Applicant**

Application is hereby made for a permit or permits to authorize the activities described herein. I certify that I am familiar with the information contained in this application, and that to the best of my knowledge and belief such information is true and accurate. By signing this application, I understand to allow representatives of the City of West Branch and the Ogemaw County Building & Zoning Department to enter upon said property in order to inspect the proposed project. I understand that the granting of other permits by local, county, state or federal agencies does not release me from the requirement of obtaining the permit requested hereon before commencing the project. I understand that the payment of fee does not guarantee permit. I hereby authorize and endorse the representative named in the Industrial or Commercial Representative section on page 5. I also understand that if granted a permit, I will incur additional fees to connect to and discharge wastewater into the West Branch Area Wastewater Treatment Plant System.

I hereby certify the work described on this permit application shall be installed in accordance with the State Plumbing Code and shall not be enclosed, covered up, or put into operation until it has been inspected and approved by the City/Township Inspector and the County Plumbing Inspector. I will cooperate with the City/Township Inspector and the County Plumbing Inspector and assume the responsibility to arrange for necessary inspections.

\_\_\_\_\_  
Name of Applicant

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

***For Office Use Only***

\_\_\_\_\_  
Permit #

\_\_\_\_\_  
City Inspector