



NYC DEPARTMENT OF BUILDINGS
SEWER SELF CERTIFICATION
HOUSE CONNECTION PROPOSAL FORM

For 1-, 2-, or 3- Family Home Only

HC

VALID FOR TWO (2) YEARS

PROJECT DATA:

Borough of _____ Building Dept. No (s) _____

Tax Block _____ Lot (s) _____ Zoning _____ Map No. _____

Project Location _____

Site Area _____ (sq. ft.) Attached NYC Water Board Review Fee \$ _____

1. PLAN

Large empty rectangular box for the plan drawing.

All House Connections Must Be Gravity Lines Only

2. HOUSE CONNECTIONS REQUESTED:

Total Developed Site Storm Flow _____ cfs

Allow. Storm Flow to the Sewers _____ cfs

Detention Retention

Sanitary Storm Comb. Drywells

No. Requested _____ xxxxxxx

Size _____ xxxxxxx

Material (s) _____ xxxxxxx

Total Q (s) _____

Note: The property owner is responsible for plugging all inactive pre-existing sewer connections.

3. CONNECTION INFO:

1. Connection to exist:
 Spur Riser Curb
Connection

2. Proposed New Riser

3. Fold Spur in

4. Drill in

5. Reuse Plugged Connections

4. SUPPORT DOCUMENTS:

- *1. Site Plan – 6 copies with hydraulic calculations _____
- *2. Survey – 3 copies with watercourse note _____
- *3. Tentative Lot Number Request Form – Attached _____ Not Applicable _____
- 4. Department of Buildings Amendment – Attached _____ Not Applicable _____
- 5. Builders Pavement Plan – Attached _____ Not Applicable _____
- 6. Boring Logs – Attached _____ Not Applicable _____
- 7. Other (Specify) _____ Attached _____

* Requires PE/RA Stamp and Original Signature (L.S. for Survey)

5. SEWER INFORMATION:

PUBLIC

- a. There (is) (is not) a sanitary sewer fronting the property available for connections. SIZE _____
- b. There (is) (is not) a storm sewer fronting the property available for connections. SIZE _____
- c. There (is) (is not) a combined sewer fronting the property available for connections. SIZE _____
- d. Sanitary discharge tributary to:

Location

City Treatment Plant - _____

- e. Distance to, and location of nearest allowable drainage plan sewer:
 - i. Sanitary Outlet _____
 - ii. Storm Outlet _____
 - iii. Combined Outlet _____

6. WATERCOURSE INFORMATION:

There (is) (is not) a watercourse traversing the development site.

Topo. Map No. _____

Statements and Signatures (Complete the appropriate sections and sign below. All professionals must affix their seal)

APPLICANT

IDENTIFICATION OF RESPONSIBILITIES

I hereby state that the above information is correct and complete to the best of my knowledge and is in compliance with all applicable Administrative Code Provisions and all Departmental Rules, Regulations, and Directives, except where noted.

Falsification of any statement is a misdemeanor under section 26-124 of the Administrative Code and is punishable by a fine or imprisonment, or both.

It is unlawful to give to a city employee, or for a city employee to accept, any benefit, monetary or otherwise, either as a gratuity for properly performing the job or in exchange for consideration. Violation is punishable by imprisonment or fine, or both.

Name of Applicant	Phone Number	
Address	City State Zip Code	
Signature	Date	

OWNER

I hereby state that I have authorized the applicant to perform the work specified herein, and agree to indemnify and save harmless to the fullest extent permitted by law, the City of New York, the New York City Water Board, and the New York City Municipal Water Finance Authority (hereinafter collectively called "the City") and their, respective officers, representatives, agencies, contractors, servants and employees from and against any and all claims, suits, actions, proceedings, and losses ("claims and losses") that may arise from the construction, maintenance, operation, or use of any connection to the City Sewer System that I or my contractor connect to the City Sewer System from the subject site after the date of this certification and prior to the issuance of this certification and prior to the issuance of the certificate of inspection by the City Department of Environmental Protection.

Name of Owner	Phone Number
Address	City State Zip Code
Signature	Date