

SANITARY DISTRICT NO. 5 OF MARIN COUNTY

2001 PARADISE DRIVE / P.O. BOX 227

TIBURON, CALIFORNIA 94920

TELEPHONE (415) 435-1501

FAX (415) 435-0221

FY20-21 APPLICATION FOR SEWER PERMIT

 RESIDENTIAL
 COMMERCIAL

Note 1: All permit applications must submit site plans indicating location of sewer laterals

Note 2: All new connection and remodel permit applications must include approved building permits

Owner's Name:	<input type="text"/>	Parcel No.:	<input type="text"/>
Project Address:	<input type="text"/>	# of Living Units:	<input type="text"/>
Mailing Address:	<input type="text"/>		
Owner's Email:	<input type="text"/>	Phone No.:	<input type="text"/>
Contractor/Plumber:	<input type="text"/>	License No.:	<input type="text"/>
	Email: <input type="text"/>	Phone No.:	<input type="text"/>
Realtor/Contractor:	<input type="text"/>	License No.:	<input type="text"/>
	Email: <input type="text"/>	Phone No.:	<input type="text"/>
Encroachment/ Bldg Permit No.:	<input type="text"/>	Issuing Agency:	<input type="text"/>

Description of Work:	<input type="checkbox"/>	New Construction	Trigger:	<input type="checkbox"/>	House Sale/Purchase
	<input type="checkbox"/>	Lateral Replacement (Full/Partial)		<input type="checkbox"/>	Remodel (> \$50k)
	<input type="checkbox"/>	Lateral Repair		<input type="checkbox"/>	Non-Compliance
	<input type="checkbox"/>	Backflow Prevention Device		<input type="checkbox"/>	Plumbing Emergency
	<input type="checkbox"/>	Other:		<input type="checkbox"/>	Other:

FOR STAFF USE ONLY

B:1278 / P:434 / T:922

# Fixture Units: _____	x	\$ _____	=	_____
Res. Admin/Inspection Fee:		\$ 100.00	+	_____
Comm. Admin/Inspection Fee:		\$ 150.00	+	_____
Add'l Inspection Fees:		\$50-100/each	+	_____
Vogt Reimb. Fee (PC Only):		\$ 3,105.00	+	_____ ***
PDSL Fee (PC Only):		\$ 13,805.63	+	_____ ****
Total SD5 Permit Fees:			=	_____

Type of Permit

<input type="checkbox"/>	New Connection
<input type="checkbox"/>	Remodel (> \$50k)
<input type="checkbox"/>	Permit Renewal
<input type="checkbox"/>	Inspection: CCTV, Repair & Replace
<input type="checkbox"/>	Pool Discharge
<input type="checkbox"/>	Septic > Public
<input type="checkbox"/>	Check Valve Installed?
<input type="checkbox"/>	Contra Costa Valve Installed?
<input type="checkbox"/>	Ejector Test: Pass·Repair·Replace

*** SD5 Resolution No. 2014-09: Vogt Line

**** SD5 Resolution No. 2009-01: Paradise Dr. Sewer Line Extension Fee

Permit No.: _____	Date Issued: _____	Cash or Check #: _____
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NOTES: Check Valve Installed, as of: _____
 Contra Costa Valve Installed, as of: _____

Final Inspection Sign-Off: _____	Date: _____
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