

### **Town of Smiths Falls**

77 Beckwith Street North, PO Box 695 Smiths Falls, Ontario K7A 2B8 (613) 283-4124 Ext. 3302

### WATER/SEWER PERMIT APPLICATION FORM

PERMIT # (Assigned by the Town following approval)

The permit holder herby certifies that this installation will be completed in accordance with the Corporation of the Town of Smiths Falls, Municipal Engineering design and specifications/By-laws, and shall commence within ninety (90) days from the date of permit issuance. Should the ninety (90) day period lapse with works not having commenced, nor an extension requested by the permit holder and approved by the Town, the permit will expire. Work is not to commence prior to the issuance of an approved permit.

PERMIT HOLDER: Owner □ Contractor □ ESTIMATED COMPLETION DATE:		
PROPERTY OWNER INFORMATION (please use mailing address)		
Name:	<del></del>	
Address:		
Telephone:E	mail:	
CONTRACTOR INFORMATION (please use mailing address)		
Company Name:		
Contractor Representative Name:		
Address:		
Telephone:E		
PROJECT SITE INFORMATION		
Address:		
Proposed Work to be Completed:		
TYPE OF CONSTRUCTION  ☐ New Build (1-10 Units)  ☐ New Build - Site Plan Control Agreement  ☐ New Build - Subdivision Agreement  ☐ Other (please specify):		
\$25.00 – Permit Fee	□	

\*Service Installations require an approved Improvement/Alteration Permit

There is a \$75.00 fee applicable for missed appointments by the Permit Holder and/or Permit Holder's agent. Failed inspections will result in a \$75.00 fee which must be paid prior to requesting a new inspection.

#### INFORMATION TO APPLICANTS

# **Design Submission**

Drawings stamped by a P. Eng must be provided for review and approval for new builds that don't fall under Site Plan Control or Subdivision Agreement.

# **Underground Locations**

It is the permit holder's responsibility to ensure all underground utilities are located prior to the commencement of works. Locates are to be requested by the permit holder through Ontario One Call. Note: There is a "7 Working Day" turnaround for all On1call locate requests.

Telephone: 1-800-400-2255 or <a href="https://www.on1call.com">www.on1call.com</a> for locate requests.

## Inspections

It is the permit holder's responsibility to call for the appropriate inspections. Please contact the Public Works & Utilities Department at 613-283-4124 ext. 3302 to request an inspection. Please provide forty-eight (48) hours notice. Inspection requests received with less than forty-eight (48) hours notice will not be guaranteed. Inspections will be scheduled weekdays between 8:00 a.m. and 3:00 p.m. The full extent of the service installation must be visible/exposed for inspection purposes.

The following inspections may apply:

- 1) When the service installation is complete, prior to backfill
- 2) When the water meter has been installed
- 3) When a live tap is being performed

If the contractor/owner covers the work prior to inspection, without approval from the Public Works & Utilities Department, a fine shall be levied as per "Schedule F" of the Water By-Law (8712-2014), and the contractor/owner shall uncover the work at their own expense and have the inspection satisfactorily completed.

# **Live Tapping**

Should a live tap be required, permit holders must engage a contractor to perform the work. Forty-eight (48) hours notice must be provided to the Public Works & Utilities Department prior to tapping. A Public Works inspector must be present at the commencement of the live tap.

#### Insurance

A Certificate of Insurance for all Contractors performing work under this permit must be provided. Coverage must include five million dollars Commercial General Liability naming "The Corporation of the Town of Smiths Falls" as an additional insured. The policies shall not be cancelled, permitted to lapse or materially changed unless the Insurer notifies the Corporation of the Town of Smiths Falls in writing at least thirty (30) days prior to the effective date of the cancellation, lapse or material change.

Signature of Applicant:	Date:	
FOR OFFICE USE ONLY		
Application Reviewed By:	Date:	_ Approved: Yes □ No □
Payment Received:	Cash □ Cheque □ Invoice □ #	
Comments:		