

Town of Middlefield Water Pollution Control Authority

SANITARY SEWER CONNECTION INSPECTION FORM

Street and No. _____

Owner _____ Date of Connection _____

Contractor _____ License No. _____

Tax Collector Billing Code _____

Permit No. _____ Map No. _____ Block No. _____ Lot No. _____

Inspector _____

Type and Size of Connection _____ Depth _____

Connection Location _____

Remarks _____

SKETCH

NORTH

WEST

EAST

SOUTH