

	PERS – Application to Connect	Planning, Engineering & Regulatory Services
	APPLICATION TO CONNECT	
Property Information		SECTION 1
Civic Address _____ Date (yyyy-mm-dd) _____ Applicant (Property Owner) _____ Contact Name _____ Email _____ Telephone _____		
Contact Information		SECTION 2
Contractor/Consultant _____ Contact Name _____ Email _____ Telephone _____		
Project Information		SECTION 3
Description of Project Please check all services that apply: Water Sanitary Sewer Storm Sewer		
Privacy Notice		SECTION 4
Collection of Personal information via this form is authorized under the Access to Information and Protection of Privacy Act, 2015 and is needed to process your application. Questions about the collection and use of the information may be directed to Manager, Development Engineering, by email: planning@stjohns.ca or by phone 709-576-8565.		

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Other Information	SECTION 5
<ul style="list-style-type: none"> • Applicant must obtain a Street Excavation Permit prior to start of work • All work is to be performed as per applicable sections of the City of St. John's Specifications Book. • Please note that for an Application to Connect the owner (or his agent) must contact the Water & Wastewater Division at 311 or 576-CITY (2489) and arrange to have the entire length of open trench and the service pipes inspected by the Water & Wastewater Division prior to backfilling. A minimum of 24 hours' notice must be provided to the Water & Wastewater Division. If the open service trench and service pipe(s) are not inspected by the Water & Wastewater Division, water will not be turned on. 	
Signature of Agreement	SECTION 6
<p>I hereby submit this application and confirm that the information supplied is, to the best of my knowledge, correct. I agree to comply with all City Regulations & By-Laws, agree to develop in accordance with the plans approved by the City of St. John's, and, not to commence development without applicable written approval and permits from the City of St. John's. In addition, I acknowledge that I have reviewed this application and agree to provide any additional information requested.</p> <p>Note: Where the applicant and property owner are not the same, the signature of the property owner may be required before the application can be accepted for processing.</p> <p>Applicant _____ Date (yyyy-mm-dd)_____</p> <p>Property Owner _____ Date (yyyy-mm-dd)_____</p>	

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Internal Use Only	SECTION 7															
<p>Planning, Engineering and Regulatory Services:</p> <p>File # _____ Application Type _____</p> <p>Date Entered (yyyy-mm-dd) _____ Staff Signature _____</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 20%;">City Services</td> <td style="width: 20%;">Water</td> <td style="width: 10%;">Yes</td> <td style="width: 10%;">No</td> <td style="width: 40%;">Size _____</td> </tr> <tr> <td></td> <td>Sanitary Sewer</td> <td>Yes</td> <td>No</td> <td>Size _____</td> </tr> <tr> <td></td> <td>Storm Sewer</td> <td>Yes</td> <td>No</td> <td>Size _____</td> </tr> </table> <p>Comments _____</p> <p>Water and Wastewater:</p> <p>Date Reviewed (yyyy-mm-dd) _____ Staff Signature _____</p> <p>Distribution List:</p> <ul style="list-style-type: none"> Applicant File Department of Public Works Department of Planning, Engineering and Regulatory Services <p>Comments _____</p>		City Services	Water	Yes	No	Size _____		Sanitary Sewer	Yes	No	Size _____		Storm Sewer	Yes	No	Size _____
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	Sanitary Sewer	Yes	No	Size _____												
	Storm Sewer	Yes	No	Size _____												
Please mail completed form to:	Planning & Development 10 New Gower Street P.O. Box 908 St. John's NL A1C 5M2	Email: planning@stjohns.ca Fax: 709-576-7688 Call: 311 or 709-754-2489														