



Cayuga County Water and Sewer Authority
 7413 County House Road
 Auburn, NY 13021
 Phone: (315) 252-0920
 Fax: (315) 515-3026
 Email: ccwsa@roadrunner.com

Acct: _____
 Tax Map #: _____
 email address: _____

Cayuga County Sewer District No. 2
Application for GRAVITY Sewer Service

Owner/Applicant's Name: _____

Mailing Address: _____

Phone: _____(home/cell) _____(work)

Hook-up is: _____Residential _____Commercial _____Other

Location of Proposed Hook-up (Street Address): _____

I hereby request permission from the Cayuga County Water and Sewer Authority (CCWSA) to connect a _____ inch sewer lateral to the public sewer system.

Approximate depth of existing sanitary sewer lateral will be provided by CCWSA. The Applicant is responsible for verifying the depth for proper connection to the sanitary sewer lateral.

The proposed sewer connection shall be completed in accordance with the CCWSA standard detail (see diagram). **All connections and sewer lines shall be inspected by a representative of the CCWSA before being buried or backfilled.** The Applicant shall contact the Village of Fair Haven to coordinate the required inspection and obtain a cost-free Sewer Permit.

The Applicant shall submit the completed application to CCWSA with a check in the amount of \$150.00 payable to the above.

In making application for sewer service, the Applicant agrees to comply with all Local Laws regarding Cayuga County Sewer District No. 2 and the Rules and Regulations established for Cayuga County Sewer District No. 2, as amended from time to time. A copy of the Rules and Regulations is available at the offices of the CCWSA and the Village of Fair Haven. Section 5.09 states the requirements pertaining to the Discontinued Use of Cesspools or Septic Tanks.

Additionally, I agree that all costs associated with the sewer connection will be at my expense and that said installation will be in conformation with all Federal, State and Local Rules & Regulations applicable to this project. I agree to be responsible for all costs and expenses incurred by the CCWSA for any damage caused by me or my contractor to any part of the grinder pump and public sewer system. County Sewer District 2 fees and rates will be reviewed annually and be subject to change.

Applicant's Signature: _____ **Date:** _____

**RESIDENTIAL/COMMERCIAL
PROHIBITED SEWAGE – Gravity System**

- **Garbage with particles greater than one-half (1/2") inch in dimension, grease or oil, bones, metal, glass, plastics, rags, etc.**
- **Any granular substances such as kitty litter, ashes, cinders, sand, etc.**
- **Absolutely no storm water (gutters, drain spouts, sump pump)**

The above requirements are necessary to protect our pumps and are NOT all inclusive. To see a more extensive list, you may refer to the CCWSA Rules and Regulations located in the offices of the Village of Fair Haven and the Cayuga County Water and Sewer Authority.

This section to be filled in by CCWSA & Connection Inspector

Date application received: _____

Inspection fee : _____

Approval: _____ (Signature) _____ (Date)

Unacceptable _____ (Date)

Inspected by: _____ (Date)

Contractor: _____

Administrative Comments: _____

Account # _____

Tax map # _____

Fair Haven Permit #: _____

Criteria for Lateral Inspection:

- Properly sealed to CCWSA stub at property line
- Crushed stone embedment/2% min. slope of pipe
- 6" x 4" wye w/6" x 4" reducer (Gravity)/4" x 4" wye GP connection
- 4" PVC Sch-40 riser pipe
- 4" clean out w/cast iron screw cap