



Side Sewer Application

Permit Fees A-Z: [Fee Schedule A-Z — City of Redmond](#)

TYPE OF USE (SELECT ONE)

- Residential & Multi-Family # of units per building
- Commercial
- Cooling Tower
- Side Sewer Repair/Modification (complete description of work on back of this application)

*Do you have an on-site septic system?

If yes: (A) Tank to be removed or (B) Tank to be drained and filled

SIDE SEWER CONTRACTOR (MUST BE ON THE CITY OF REDMOND ACTIVE SIDE SEWER CONTRACTOR ROSTER)

Company Name: _____

Phone #: _____

Office Use Only

PROJ: _____ DATE RCV'D: _____

SWR: _____ ACCEPTED BY: _____

SITE LOCATION

Project Name: _____

Subdivision Name: _____

Site Address: _____

Division #: _____ Lot #: _____ Building #: _____

Tax Parcel Number: _____

COR Building Permit #: _____

A SKETCH OF THE SIDE SEWER, ON CITY PROVIDED AS-BUILT CARD, WILL BE REQUIRED UPON INSPECTION. SIDE SEWER CONTRACTOR MUST BE LICENSED AND BONDED AND ON THE CITY APPROVED SIDE SEWER CONTRACTOR ROSTER.

METER SIZE FOR COMMERCIAL AND COOLING TOWER

5/8 x 3/4-inch 1-inch 1-1/2-inch 2-inch 3-inch 4-inch 6-inch

Private Pump Used: _____ (Make/Model _____ attached specifications)

OWNER NAME

Name: _____

Mailing address: _____

City: _____ State: _____ Zip: _____

Phone #: _____

E-mail: _____

Permit Contact & Phone#: _____

OWNER BILLING ADDRESS (IF DIFFERENT THAN MAILING ADDRESS)

Owner Name: _____

Billing Address: _____

City: _____ State: _____ Zip: _____

Phone #: _____

E-mail: _____

OWNER OR AUTHORIZED AGENT

I hereby certify that I have read and examined this application and know the same to be true and correct, and I am authorized to apply for this permit. I hereby agree to comply with all applicable city ordinances pertaining to the installation of side sewers and use of city sewer system.

Print Name: _____ Date: _____

Signature: _____