



APPLICATION FOR SANITARY SEWER LATERAL AND SEWER LATERAL TAP PERMIT

Receipt No.: _____
(Number Provided by MCSD upon Receipt of Fee)

Lateral Permit No.: _____
(Number Provided by MCSD when Permit Issued)

Dear Applicant:

To complete your Sanitary Sewer Lateral and Sewer Tap application, you must submit all of the necessary items. If your application materials are incomplete, you will be sent a deficiency notice, and your application will be retained for 60 days. If the necessary information is not received within the 60 day period, your application will be denied due to incompleteness. Please complete all of the following steps (only one copy of the requested documents needs to be submitted):

- Sign and date the application form and fill it out completely. Unless the project is outside the District's boundaries, it can be signed by the owner or a representative.
- Make the check payable to Michigan City Sanitary District
- Submit drawing of Proposed Sewer Lateral and Sewer Tap Connection.
- Please be advised that if your project will disturb one (1) or more acres of land area, coverage under 327 IAC 15-5 (Rule 5) is required. Rule 5 is the General Permit for Storm Water Runoff Associated with Construction Activity. You can review the Rule 5 web site for information at:
<http://www.in.gov/idem/4902.htm>.
- If the structure is outside the boundaries of the Michigan City Sanitary District, the owner will have to enter into a Sewer Use Agreement with the District before it will be allowed to discharge any sewage to the District's sewer system. The owner must sign the application.
- If the facility is a business that will discharge something other than mere residential waste water (what comes out of a residence), the applicant must fill out a Discharge Survey and may need to obtain an additional discharge permit from the District.

Please send Sanitary Sewer Lateral and Sewer Tap Application and Payment to:

Michigan City Sanitary District
Engineering Department
1100 E 8th Street
Michigan City, IN 46360

Attention: Arber Himaj

Telephone: (219) 874-7799



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Engineering Department
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Michigan City, IN 46360

INSTRUCTIONS:

1. *This form must be filled out completely.*
2. *Additional pages (attachments following this form) are part of this application form and must be filled out completely.*
3. *Submit the application form, payment, and additional pages to the above address.*
4. *If you have any questions regarding this application, call MCSD'S Office at (219) 874-7799.*

1. APPLICANT		2. OWNER	
a. Name:		a. Name:	
b. Company Name:		b. Company Name:	
c. Address:		c. Address:	
d. City, State, Zip Code:		d. City, State, Zip Code:	
e. Email:		e. Email:	
f. Telephone number:		f. Telephone number:	
3. ADDRESS / LOCATION OF CONSTRUCTION		4. CONTRACTOR INFORMATION	
a. Name:		a. Name:	
b. Address/Location:		b. Address:	
c. City:		c. City:	
d. County:		d. Registration / License Number:	
5. APPLICATION TYPE		6. OWNER TYPE	
<input type="checkbox"/> New Connection <input type="checkbox"/> Repair <input type="checkbox"/> Replacement <input type="checkbox"/> Disconnect		<input type="checkbox"/> Residential <input type="checkbox"/> Commercial/Industrial <input type="checkbox"/> Other	
7. TYPE OF PIPE			
<input type="checkbox"/> SDR 35 PVC <input type="checkbox"/> SDR 26 PVC <input type="checkbox"/> SDR 21 PVC <input type="checkbox"/> SCHDL 40 PVC <input type="checkbox"/> SCHDL 80 PVC <input type="checkbox"/> DUCTILE IRON			
8. LATERAL INFORMATION (Skip if this is a Disconnection Application)			
a. Type of Lateral Sewer: <input type="checkbox"/> Gravity <input type="checkbox"/> Forced(Grinder Pump)		b. Connection Point:	
c. Diameter of Pipe: _____	d. Length of Pipe: _____	e. Sewage Pump: <input type="checkbox"/> Yes <input type="checkbox"/> No	f. Basement: <input type="checkbox"/> Yes <input type="checkbox"/> No
g. Lowest floor elevation at least one (1) ft. above manhole elevation: <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA		h. Tap Location (Describe exact location or provide GPS coordinate)	
9. FEES (Make Payable To Michigan City Sanitary District)			
Single and Multiple-Family Dwelling (Within City Limits) : <input type="checkbox"/> \$50		All Others (Within City Limits): <input type="checkbox"/> \$500	
Single and Multiple-Family Dwelling: <input type="checkbox"/> \$500 (Outside the City Limits)		All Others (Outside the City Limits): <input type="checkbox"/> \$1000	
CERTIFICATION AND SIGNATURE			
I, the undersigned, hereby agree to: Leave the sewer lateral uncovered until inspected and approved by the Department of Code Enforcement and the MCSD; Construct and connect the above detailed building sewer in strict accordance with the most recent versions of the Uniform Plumbing Code, City of Michigan City Municipal Code, and MCSD standards; and allow inspection of the sewer lateral, and all connections to the sewer later, at all times by the MCSD and the Department of Code Enforcement.			
NAME OF OWNER, CONTRACTOR OR AUTHORIZED AGENT:		TITLE:	
SIGNATURE:		DATE APPLICATION SIGNED: (month, day, year)	



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Drawing of Proposed Sewer Lateral Connection

Name: _____

Phone Number: _____

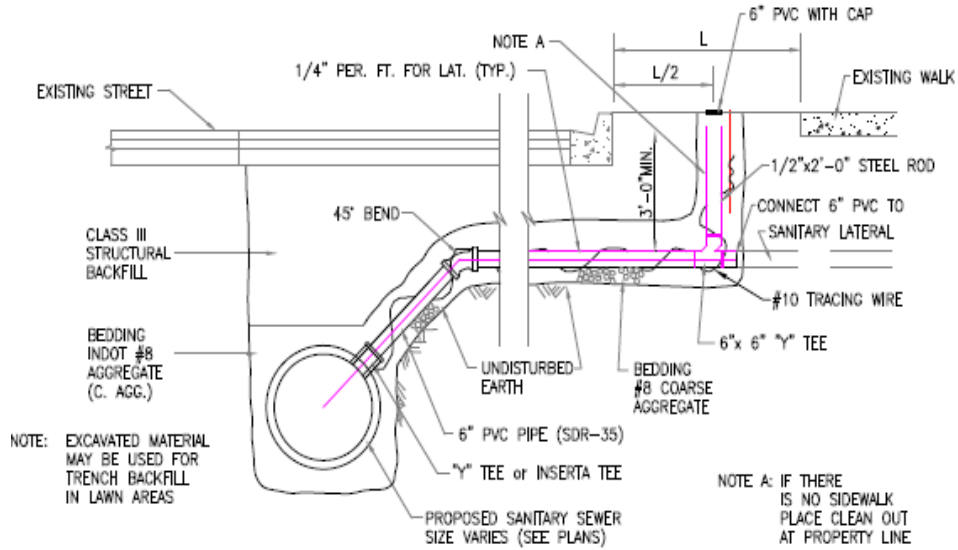
Date: _____

Provide description and drawing showing all buildings, structures and roadways, water lines, and the directional path of the proposed lateral sewer connection. If the project is outside of the District boundaries, you must submit a survey of the property to be served and a full legal description of that property.

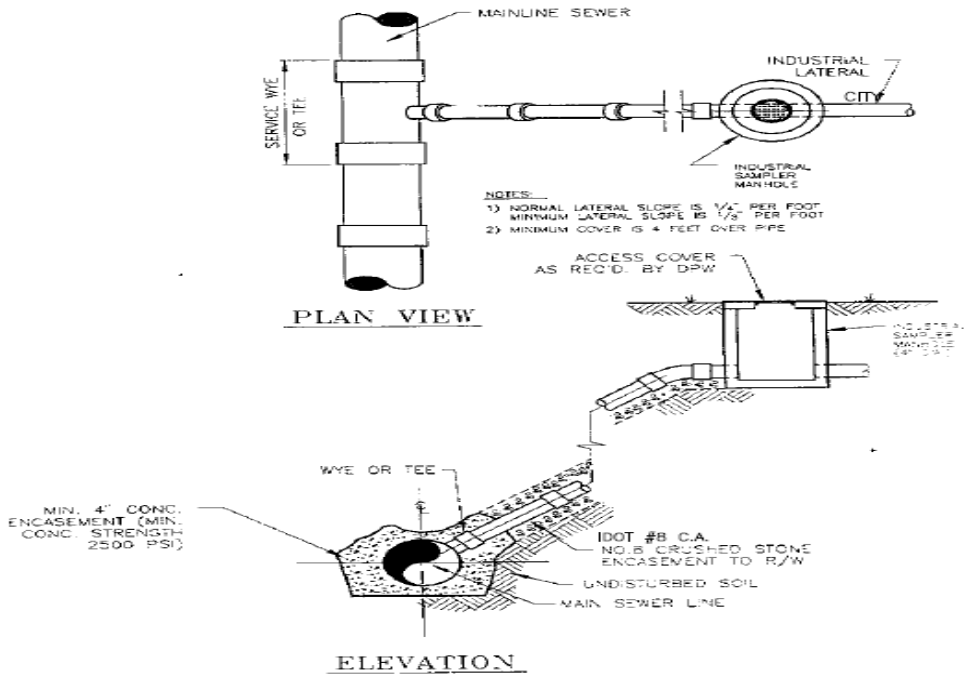
Note: If your existing sanitary sewer lateral is part of a community lateral you must not disconnect or interrupt the community lateral without consent of all parties involved, including the Michigan City Sanitary District.

Note: All lateral sewers within 10 feet of a water line and/or within 50 feet of a well must be installed with water grade piping (SDR 21 PVC or Ductile Iron) as per State Code 327 IAC 3. All installations must be in accordance with the Uniform Plumbing Code, City of Michigan City Municipal Code, and MCSD standards. Any and all variances are allowable only if written permission is provided by the MCSD and/or the City of Michigan City.

Typical Installation



SANITARY LATERAL DETAIL



INDUSTRIAL SEWER SERVICE CONNECTION

Note: All lateral sewers within 10 feet of a water line and/or within 50 feet of a well must be installed with water grade piping (SDR 21 PVC or Ductile Iron) as per State Code 327 IAC 3. All installations must be in accordance with the Uniform Plumbing Code, City of Michigan City Municipal Code, and MCSD standards. Any and all variances are allowable only if written permission is provided by the MCSD and/or the City of Michigan City.