

# ROSSMOOR / LOS ALAMITOS AREA SEWER DISTRICT

Permit No. \_\_\_\_\_ - \_\_\_\_\_

Issue Date \_\_\_\_\_

## SEWER CONNECTION PERMIT

Permit Valid One (1) Year From Date of Issue

Project Address / Location \_\_\_\_\_

Issued By \_\_\_\_\_

Parcel Number or Lot Number and Tract \_\_\_\_\_

Applicant / Owner \_\_\_\_\_

Phone ( ) \_\_\_\_\_

Email \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_

Zip \_\_\_\_\_

Contractor \_\_\_\_\_

State License \_\_\_\_\_

Phone ( ) \_\_\_\_\_

Email \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_

Zip \_\_\_\_\_

Plans Prepared by \_\_\_\_\_

State License \_\_\_\_\_

Phone ( ) \_\_\_\_\_

Email \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_

Zip \_\_\_\_\_

### PROJECT TYPE

Residential:  Single Family  Duplex  Apartment  Condominium / Townhouse

No. of Units \_\_\_\_\_ No. of Buildings \_\_\_\_\_ Lot Size \_\_\_\_\_

Commercial/Industrial:  Office / Professional  Retail  Restaurant  Convalescent / Retirement  Hotel / Motel  Manufacturing  Other

No. of Buildings \_\_\_\_\_ Gross Square Footage Building Area \_\_\_\_\_ Lot Size \_\_\_\_\_

I hereby certify that I have read this application, and state that the above is correct and that I agree to comply with all District ordinances, standards and applicable state laws.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

Call 48 hours (Excluding Weekends and Holidays) in advance for inspection (714) 481-8008

### FEES: (See Worksheet)

Permit	\$ 10.00
Connection	\$ _____
Plan Check	\$ _____
Inspection	\$ _____
<b>TOTAL</b>	\$ _____
Amount Paid _____	\$ _____
	Date _____

### INSPECTOR'S REPORT

Type of Connection: \_\_\_\_\_

Contractor's Foreman: \_\_\_\_\_

Notes: \_\_\_\_\_

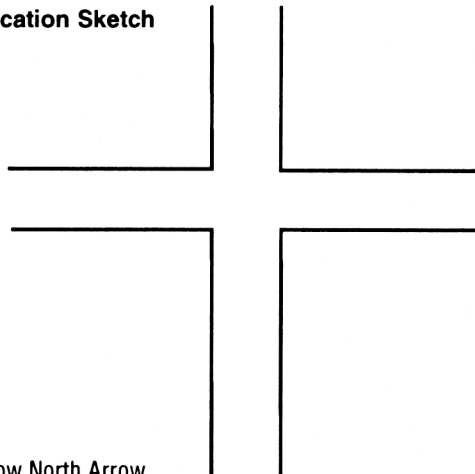
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Inspection:

By \_\_\_\_\_ Date \_\_\_\_\_ Time \_\_\_\_\_

By \_\_\_\_\_ Date \_\_\_\_\_ Time \_\_\_\_\_

### Location Sketch



Show North Arrow

- Copies To: 1) RLAASD File White  
 2) Inspector Canary  
 3) Owner / Field Pink

Top 2 copies to remain intact until inspection is complete.