North of River Sanitary District Sewer Permit Application

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will be e-mailed to th minimum of 48 hours have any questions.	following information to obtain a Sewer Permit. Upon payment of all fees, a permit to <i>Contact E-mail</i> address listed below. Submit a "Sewer Inspection Request" form a sprior to the inspection request. Please contact the District at 661-399-6411 if you ***********************************
Date:	
Owner/Contractor 1	Information
Company Name:	
Company Address:	
Contact Name:	
Contact Number:	
Contact E-mail:	
Development Inform	<u>nation</u>
Assessor's Parcel Nu	mber (APN):
Tract No.:	
Tract Phase:	
Parcel Map No.:	
Lot No.:	
Property Address:	
Development Descri	ption and Quantity
Single Family:	
Multiple Family(1 Be	edroom):
Multiple Family(2 Be	
Multiple Family(3+ I	
Commercial (Describ	
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^{**}All sewer permits issued shall require District inspection after improvements, repairs, and/or installations are complete. It shall be the responsibility of the Owner/Contractor to contact the District to schedule an inspection. A 48-hour minimum notice shall be required on inspections.

^{**}Inspections requiring backfill shall be inspected and approved by the District prior to backfill. Failure to do so shall require excavation to expose connection or video inspection. Video inspections shall be performed by the District and be subject to the current video fee.