



**SARATOGA COUNTY SEWER DISTRICT #1**  
**SEWER LATERAL PERMIT APPLICATION**  
**Commercial**

Date Applied: \_\_\_\_\_

<b>FOR OFFICE USE ONLY:</b>	
Permit Number: _____	Reviewed by: _____ / _____
NYSDEC Waiver Required? No <input type="checkbox"/> Yes <input type="checkbox"/>	Variance Required? No <input type="checkbox"/> Yes <input type="checkbox"/>

Name of Project: \_\_\_\_\_  
Location of Project: \_\_\_\_\_  
Tax Map Number (SBL) of Project's Location: \_\_\_\_\_  
Description of Project: \_\_\_\_\_

PLEASE CHECK ONE:

New Construction  Existing Construction

PLEASE CHECK ONE:

Gravity Lateral (\$600)  Outdoor Grinder Pump Lateral (\$600)   
Indoor Grinder Pump Lateral (\$600)  Lateral Repair (\$150)

PLEASE CHECK ONE:

Will Septic Tank be Abandoned? No  Yes  - City, Town or Village Permit #: \_\_\_\_\_

**Contractor:** \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
E-Mail: \_\_\_\_\_

**Property Owner's Name:** \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
E-Mail: \_\_\_\_\_

**Company Information:**  
Water consumption (gallons per day): \_\_\_\_\_  
Water production (gallons per day): \_\_\_\_\_  
Number of Employees: \_\_\_\_\_

Check applicable company NAICS codes. N/A

- |   |   |
|---|---|
| <input type="checkbox"/> 488119-Aviation Operations   | <input type="checkbox"/> 3222121 and 322130-Paper mills   |
| <input type="checkbox"/> 314110-Carpet Manufacturers  | <input type="checkbox"/> 325320-Pesticides and Insecticides   |
| <input type="checkbox"/> 811192-Car Washes  | <input type="checkbox"/> 324-Petroleum and coal product manufacturing                                   |
| <input type="checkbox"/> 325-Chemical Manufacturing   | <input type="checkbox"/> 324110 and 424710-Petroleum refineries and terminals                           |
| <input type="checkbox"/> 332813-Chrome electroplating, anodizing, and etching services  | <input type="checkbox"/> 352992-photographic film manufacturers   |
| <input type="checkbox"/> 325510-Coatings, paints, and varnish manufacturers   | <input type="checkbox"/> 325211-Polymer manufacturers   |
| <input type="checkbox"/> 325998-Firefighting foam manufacturers   | <input type="checkbox"/> 323111 and 325910- Printing facilities where inks are used in photolithography |
| <input type="checkbox"/> 562212-Landfills   | <input type="checkbox"/> 313210, 313220, 313230, 31324, 313320-Textile mills (textiles and upholstery)  |
| <input type="checkbox"/> 339112-Medical Devices   | <input type="checkbox"/> 562-Waste management and remediation services                                  |
| <input type="checkbox"/> 922160-Municipal Fire departments. Firefighting training centers, including federal agencies that use, trained with, and tested firefighting foams | <input type="checkbox"/> 221320-Wastewater treatment plants   |

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Work shall be in accordance with current Saratoga County Sewer District #1 (SCSD #1) Standards and Specifications. SCSD #1 requires the sewer lateral permit applicant and the project's contractor to designate an agent to whom SCSD #1 shall direct all written, verbal and electronic communications regarding the proposed project or sewer connection.

**NOTE:** By naming such designated agent, the applicant and the project's contractor agree to be bound by all decisions communicated by said designated agent to SCSD #1 regarding the proposed project. By signing below, the designated agent assumes the responsibility of complying with SCSD#1's Sewer Use Ordinance requirements and acknowledges that he/she/it could be subject to enforcement action thereunder if necessary. SCSD #1's permit to construct sanitary sewer facilities or connections shall expire one (1) year from the date of its execution by SCSD #1 and the permittee. **See page three (3) for additional requirements.**

**Designated Agent:** \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
E-Mail: \_\_\_\_\_  
Signature of Designated Agent: \_\_\_\_\_  
Name of Designated Agent (print): \_\_\_\_\_

**ADDITIONAL REQUIREMENTS:** Call 518-664-7396 twenty-four (24) hours in advance to schedule inspection of sewer lateral installation. Approval for use will not be granted until a satisfactory inspection has been completed. Contractor is responsible for establishing flow and if applicable, completion of the grinder pump(s) start-up. The property owner will own and maintain the lateral up to the point of connection with SCSD #1 sewer main.

**This permit does not convey legal access to any real property. Please be advised that local municipalities may have additional permitting requirements.**

**Mail complete permit application along with cash or check to, P.O. Box 550  
Mechanicville, NY 12118. Or submit your application and payment in person at, 1002  
Hudson River Road Mechanicville, NY 12118.**

**For contractor requirements and standard details please follow the link below:**  
<http://www.saratogacountyny.gov/departments/sewer-district-1/>

<b>FOR OFFICE USE ONLY:</b>			
Engineering Certification Required	Yes <input type="checkbox"/> No <input type="checkbox"/>		
Special Conditions Attached	Yes <input type="checkbox"/> No <input type="checkbox"/>		
<b>Fee: \$</b> _____	<b>Days:</b> _____	<b>Date Paid:</b> _____	<b>Insp. Engr.:</b> _____
<b>Check #</b> _____			
<b>Insurance Certificate Approved date:</b> _____	<b>Checked By:</b> _____		
_____			
<b>Permit Administrator</b>			
_____			
<b>Date of Issue</b>			
<b>SPECIAL CONDITIONS:</b>			
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