

Water & Sewerage Permit

Application Checklist & Submission Package



This document and all attachments are provided as assistance to persons seeking certain approvals and permits as required by various by-laws of the City of Saint John and other acts and regulations. Should there be a discrepancy between this document, and all attachments, and the associated by-law, act or regulations, the associated by-law, act or regulation shall prevail.

Infrastructure Application

Checklist required for a complete application for:

➤ **Water and Sewerage Permit**

Required for all proposed new, renewal, or repairs to water, sanitary and/or storm sewer installations.

Applicant must submit:

- Completed **Application Form**.
- \$100 application **Permit Fee**.
- Sketch/drawing** showing location of work;
 - Print out from the City's mapping system could be used for assistance



LOCATION	CIVIC ADDRESS :		PID # :	
STAFF USE	HERITAGE AREA: Y / N INTENSIFICATION AREA: Y / N FLOOD RISK AREA: Y / N APPROVED GRADING PLAN: Y / N			
	APPLICATION #:		DATE RECEIVED:	
			RECEIVED BY:	
APPLICANT INFORMATION	APPLICANT		EMAIL	
				PHONE
	MAILING ADDRESS			POSTAL CODE
	CONTRACTOR		EMAIL	
				PHONE
	MAILING ADDRESS			POSTAL CODE
APPLICANT INFORMATION	OWNER		EMAIL	
				PHONE
	MAILING ADDRESS			POSTAL CODE
PRESENT USE:		PROPOSED USE:		
CHECK ALL THAT APPLY	BUILDING	PLANNING	INFRASTRUCTURE	HERITAGE
	<input type="checkbox"/> INTERIOR RENOVATION	<input type="checkbox"/> NEW CONSTRUCTION	<input type="checkbox"/> VARIANCE	<input type="checkbox"/> STREET EXCAVATION
	<input type="checkbox"/> EXTERIOR RENOVATION	<input type="checkbox"/> ACCESSORY BLDG	<input type="checkbox"/> PLANNING LETTER	<input type="checkbox"/> DRIVEWAY CULVERT
	<input type="checkbox"/> ADDITION	<input type="checkbox"/> POOL	<input type="checkbox"/> PAC APPLICATION	<input type="checkbox"/> DRAINAGE
	<input type="checkbox"/> DECK	<input type="checkbox"/> DEMOLITION	<input type="checkbox"/> COUNCIL APP	<input type="checkbox"/> WATER & SEWERAGE
	<input type="checkbox"/> CHANGE OF USE	<input type="checkbox"/> SIGN	<input type="checkbox"/> SUBDIVISION	<input type="checkbox"/> OTHER
	<input type="checkbox"/> MINIMUM STANDARDS	<input type="checkbox"/> OTHER	<input type="checkbox"/> OTHER	<input type="checkbox"/> HERITAGE DEVELOPMENT
			<input type="checkbox"/> HERITAGE SIGN	
			<input type="checkbox"/> HERITAGE INFILL	
			<input type="checkbox"/> HERITAGE DEMO	
			<input type="checkbox"/> OTHER	
DESCRIPTION OF WORK				

I consent to the City of Saint John sending to me commercial electronic messages, from time to time, regarding City initiatives and incentives.

General Collection Statement

This information is being collected in order for the City of Saint John to deliver an existing program / service; the collection is limited to that which is necessary to deliver the program / service. Unless required to do so by law, the City of Saint John will not share your personal information with any third party without your express consent.

The legal authority for collecting this information is to be found in the Municipalities Act and the Right to Information and Protection of Privacy Act. For further information or questions regarding the collection of personal information, please contact the Access & Privacy Officer:

City Hall Building
 8th Floor - 15 Market Square
 Saint John, NB E2L 1E8
commonclerk@saintjohn.ca
 (506) 658-2862



I, the undersigned, hereby apply for the permit(s) or approval(s), indicated above for the work described on plans, submissions and forms herewith submitted. This application includes all relevant documentation necessary for the applied for permit(s) or approval(s). I agree to comply with the plans, specifications and further agree to comply with all relevant City By-laws and conditions imposed.

 Applicant Name

 Applicant Signature

 Date

(To be completed by Applicant)				(City Staff use only)	
Civic Address:				Application #:	
PID:				Permit # :	
<input type="checkbox"/> New Installation <input type="checkbox"/> Renewal <input type="checkbox"/> Repair				Received By:	
Water Service	Fire Line	Sanitary Lateral	Storm Lateral	Date:	
<input type="checkbox"/> 19mm	<input type="checkbox"/> 100mm	<input type="checkbox"/> 100mm	<input type="checkbox"/> 100mm	Water Meter Required?	
<input type="checkbox"/> 25mm	<input type="checkbox"/> 150mm	<input type="checkbox"/> 150mm	<input type="checkbox"/> 150mm	<input type="checkbox"/> YES	<input type="checkbox"/> NO
<input type="checkbox"/> 50mm	<input type="checkbox"/> 200mm	<input type="checkbox"/> 200mm	<input type="checkbox"/> 200mm	Street Excavation Permit Required?	
<input type="checkbox"/> 75mm	<input type="checkbox"/> 250mm	Other:	<input type="checkbox"/> 250mm	<input type="checkbox"/> YES	<input type="checkbox"/> NO
<input type="checkbox"/> 100mm	Other:		Other:	Permit Fee Received?	
<input type="checkbox"/> 150mm				<input type="checkbox"/> YES	<input type="checkbox"/> NO
<input type="checkbox"/> 200mm					
Other:	Requested Start Date:			<input type="checkbox"/> YES	<input type="checkbox"/> NO
	Expected Completion Date:				
COMMENTS					

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I, the undersigned, hereby apply for a Water & Sewerage Permit for the described work herewith submitted. I agree to comply with the plans, specifications, permit conditions and all relevant by-laws and regulations governing such work.

Applicant Name

Applicant signature

Date