



Town of Strathmore  
Permit Number

# Town of Strathmore

680 Westchester Road  
Strathmore, AB T1P 1J1  
Phone: (403) 934-3133

Fax: (403)934-4713  
email: [development@strathmore.ca](mailto:development@strathmore.ca)

## WATER, SANITARY SEWER & STORM SEWER CONNECTION PERMIT

The Applicant must contact The Town of Strathmore (403) 934-3133 Service Connections, 2 days prior to connecting to municipal water, sanitary sewer and storm sewer. Before backfilling, the pictures of the connection(s) must be emailed to: [development@strathmore.ca](mailto:development@strathmore.ca) indicating the civic address in the subject line.

DATE OF APPLICATION: _____				
APPLICATION FOR:		<input type="checkbox"/> WATER & SANITARY SEWER CONNECTION	<input type="checkbox"/> STORM SEWER CONNECTION	FEE: _____
Project Address - Civic		Project Address - Legal		
		Lot	Block	Plan
Proposed Use	<input type="checkbox"/> Residential	<input type="checkbox"/> Commercial	<input type="checkbox"/> Industrial	<input type="checkbox"/> Institutional
<b>BUILDER :</b>		Email: _____		
Name:	_____	Phone: _____		
Address:	_____	Fax: _____		
City:	_____	Province:	_____	PC: _____
<b>CONTRACTOR:</b>		Email: _____		
Contractor Name	_____	Phone: _____		
Address:	_____	Fax: _____		
City:	_____	Province:	_____	PC: _____

I authorize the appropriate Town Employees of the Town of Strathmore OR a Representative of EPCOR the right to access the property for the purpose of any necessary inspection in conjunction with this application. The undersigned hereby agrees to abide by all applicable water, sanitary sewer and storm sewer connection specifications of the Town of Strathmore.

NAME OF APPLICANT (please print): \_\_\_\_\_

SIGNATURE OF APPLICANT: \_\_\_\_\_

<b>FOR OFFICE USE ONLY</b>	
DATE OF ISSUANCE OF PERMIT:	_____
PERMIT ISSUER'S NAME:	_____
PERMIT ISSUER'S SIGNATURE:	_____
DEVELOPMENT PERMIT #:	_____



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## WATER, SANITARY SEWER & STORM SEWER CONNECTION CHECKLIST

<b>DATE OF SERVICE CONNECTION:</b>			
<b>Project Address - Civic</b>		<b>Project Legal Description:</b>	
		Lot	Block
			Plan
<b>CONTRACTOR :</b>			
Name: _____		Signature : _____	
Company: _____		Ticket number: _____	

### General

- Notified Town of Strathmore Service Connections 48 hours prior to commencement of service connection
- Pictures taken PRIOR to backfilling and sent to [development@strathmore.ca](mailto:development@strathmore.ca)
- All water, sanitary and storm rough in piping completed and installed to GRADE SLIP requirements
- Applied for locates with OneCall, notified the Town of any conflicts
- Submitted completed Checklist to Town of Strathmore Service Connections via email or mail
- If breaking a Town road-right-of-way: applied for an EXCAVATION PERMIT

### Water

- Water services up to and including 50 mm installed in common trench with sanitary and storm sewer lines
- Water services larger than 50 mm installed in separate trench
- Tracing wire installed where services cannot be laid 90 degrees to the main
- Performed Visual Leak Test

### Sanitary Sewer

- Slope towards Main: \_\_\_\_\_
- Performed visual inspection of all joints
- Any debris which may have entered the service pipe or main, removed prior to completion of service connection

### Storm Sewer

- Slope towards Main: \_\_\_\_\_
- Performed visual inspection of all joints
- Any debris which may have entered the service pipe or main, removed prior to completion of service connection

Sketch (Please label dimension including depth and location relative to center of lot):



