



CORPORATION OF THE MUNICIPALITY OF BROCKTON

Municipal Office
100 Scott Street, Box 68
WALKERTON, Ontario NOG 2V0
(519) 881-2223

Lateral Sewer Connection Permit

Date: _____

Permission is granted to: _____

Address: _____

Lot No. _____ Plan No. _____

To construct a building sewer on the above property and connect same to lateral sewer serving this property, said construction to be carried out according to the requirements of By-law #81-34 of the Municipality of Brockton and to the satisfaction of Sewer Works.

Please Note: *All services must be inspected by the Municipal Official before being covered up.
Failure to do so could result in having the work excavated for inspection at the contractor's expense.*

State of Construction: _____

Estimated Completion Date: _____

Type of Waste: _____

Contractor: _____

Fee: \$110.00

Signature of Applicant

Municipal Official