Wastewater Treatment Plant
7113 West Coast Road
Sooke, B.C., V9Z 1J2
Tel: 250.642.1634
wastewater@sooke.ca

Sewer Connection Request Form

****Highway Use Permit (HUP) must be in Place****

DESCRIPTION OF PROPERTY:

Street Address: _____

Legal Description: Lot_____Block_____Section_____Plan_____Except: _____

_____

CONTACT INFORMATION

Contact Name:

_____

Address:

_____

Email: Telephone: Cell:

INFORMATION REQUIREMENTS

- ❑ Service Connection Request HUP # _____
- ❑ Main Connection Request

Requested Date : _____

(48 Hours notice is required)

- **This request may be delayed if any emergency occurs on the inspection date. You will be contacted if a delay will occur due to an emergency.**

WAIVER AND INDEMNITY:

I assume all risks incidental to construction and inspection services and agree to release, save harmless and indemnify the District of Sooke and its officials, agents, servants and representatives, from and against all claims, actions, costs, expenses and demands with respect to the death, injury, loss or damage to persons or property arising out of or in connection with the construction and inspection services. I understand that no warranty is implied for inspection services and that this waiver and indemnity is binding on me, my heirs, executors and assigns.

Applicant's Signature Date

FREEDOM OF INFORMATION NOTICE: *personal information contained on this form is collected under the Freedom of Information and Protection of Privacy Act sections 26(c) and will be used for the purpose of processing your application. If you have any questions about the collection and use of this information, please contact Corporate Services department.*

Internal Use only:

- ❑ Site visit completed: Date _____ Operator _____
- ❑ Photos attached
- ❑ Accepted or Rejected