

Summer Village of Birchcliff

Application for Municipal Sewer System Connection

The information on this form is collected under the authority of section 4(c) of the Alberta Protection of Privacy Act.
This information will be used to apply for a sewer connection with the Summer Village of Birchcliff.
If you have any questions about the collection of your personal information, you may contact: information@sylvansummervillages.ca.

To be completed by installer:

Date: _____ Roll # _____

Owner/s: _____

Civic Address: _____

Mailing Address: _____

Lot: _____ Block: _____ Plan: _____

Permanent Use: Seasonal Use:

Telephone Number: _____

Type of connection: Direct to House connection:
Existing/new Septic Tank:
Existing/new holding tank:

Type of pump: Name and Model: _____

Serial Number: _____

Letter of certification from the manufacturer if other than recommended pump is used: **Yes:** **No:**

It is imperative that the grinder pump selected by the owner or their installer be capable of operating connected to a low pressure sewer system.

Contractor/Installer/Plumber: Company Name: _____
Telephone Number: _____
Address: _____

New installations permit number from Superior Safety Codes Inc.: _____

**** (Permit is mandatory for new tank installation)**

Applicant signature: _____

Office use only:

Hook up acceptable: **Yes** **No**

Additional Information: _____

Old system disconnected **Yes** **No**

If an additional inspection is required the cost is \$100.00 to the installer: **Yes** **No**

Date of inspection approval: _____

Inspector signature _____

Actual date of turn on: _____ Turned on by: _____

Please submit completed application to: information@sylvansummervillages.ca