

TOWN OF MILFORD
SEWER CONNECTION PERMIT

Date: _____

This certifies that _____ is granted
permission to connect the building described below to the Milford Sewer System per the
Town of Milford Sewer Ordinance.

(1) Residential use:

Location: _____

(2) Non-residential use:

Location: _____

Name of Master Plumber: _____

Type of pipe to be used: _____

This connection must be inspected by the Plumbing Inspector or his designee before
covering.

.....

CERTIFICATE OF INSPECTION

Milford, Maine

On this date I have inspected and approved the above sewer line connection.

Date of Inspection: _____

Plumbing Inspector