



PUBLIC WORKS DEPARTMENT

411 Main Street – 2nd Floor
P.O. Box 3420
Chico, CA 95927
(530) 879-6900
sewerconnections@chicoca.gov

APPLICATION FOR SEWER CONNECTION

Property Information		
Address: _____		
Assessor's Parcel Number: _____		
City	County (annexation to the City is normally required for sewer service)	
Is the septic failing?	Yes	No
Water Source:	On-site Well	CalWater
Land Use:		
Vacant		
Residential – No. of Existing Units: _____ No. of Additional Units: _____		
Commercial – type: _____		
Industrial (Industrial users must also complete an <i>Industrial Waste Application</i>)		
If you have a building permit, what is the activity number? _____		

Applicant and Owner Information	
Applicant: _____	
Mailing Address: _____	
Phone: _____	Email: _____
<i>Owner (if different than Applicant):</i> _____	
<i>Mailing Address:</i> _____	
<i>Phone:</i> _____	<i>Email:</i> _____

For Land Divisions Only	
What is your Subdivision application name? _____	
_____ # of Lots	_____ # of Units

For Office Use Only: Application Fee Paid: \$245 City, \$275 County Date: _____
Application Received By: _____ SSA#: _____