



Wayland Wastewater Management District (WWMD)
 66 River Road, Wayland, MA 01778-2697
 508-358-6851 wastewater@wayland.ma.us
MUNICIPAL SEWER USE APPLICATION

Applicant Name	Property Owned <input type="checkbox"/>	Property Rented <input type="checkbox"/>
Applicant Phone #	Owner/Site Manager (SM)	
Applicant Email	SM Phone #	
Business Name	SM Email	
Location Address		
Proposed Use		

Check all that apply

Change in Business <input type="checkbox"/>	Change in Flow <input type="checkbox"/>	Vacant <input type="checkbox"/>	Existing Connection <input type="checkbox"/>
New Owner <input type="checkbox"/>	Change in Space <input type="checkbox"/>	Occupied <input type="checkbox"/>	New Connection <input type="checkbox"/>
Closed Business <input type="checkbox"/>	New Billing Address		

<i>To Be Completed by WWMD</i>		
Current Design Flow	<i>gallons per day</i>	Basis for Current Design Flow
Change Design Flow	<i>gallons per day</i>	Basis for Change to Design Flow
Total Final Design Flow	<i>gallons per day</i>	Source of Increase

Applicant/Site Manager Acknowledgement:

- The undersigned has read the rules and regulations and agrees to conform with the laws, rules, regulations and ordinances relating to the use of the WWMD System.
- This application addresses solely wastewater design flow allocations and billing by the WWMD.
- Additional approvals are required for construction activities associated with changed or new physical connections to the sewer.
- All costs associated with the construction of sewer modifications are to be borne by the applicant.
- This application is not considered approved until all fees have been paid and WWMD signature provided.
- Application may be deemed invalid if the Privilege Fee payment is not received within 90 days.

Signature of Applicant: _____ Print Name: _____ Date: _____

Signature of Site Manager: _____ Print Name: _____ Date: _____
If required

WWMDC USE ONLY	Privilege Fee : \$ _____ <i>(Design Flow</i> _____ <i>gpd X Fee \$</i> _____ <i>)</i>
WWMD Approval [_____] or Disapproval [_____]. Signature: _____ Date: _____	
Comments:	

Directions: 1) Return the completed Municipal Sewer Use Application to the WWMD at the location noted above. The WWMD will review for completion. 2) If no fee is required, the DPW will review and approve as appropriate. 3) If a Privilege Fee is required, the Application will require approval by the Commission. 4) Applications requiring Privilege Fee payment will not be considered approved until payment is made to the Treasurer's Office, 41 Cochituate Road, Wayland, MA by check payable to "Town of Wayland". 5) **Applicant is required to comply with all applicable wastewater regulations and pay all fees prior to permitted occupancy.**