

LEWIS COUNTY COMMUNITY DEVELOPMENT
2025 NE Kresky Avenue
Chehalis, WA 98532
(360) 740-1146

SEWER AVAILABILITY APPROVAL

To be completed by applicant:

Applicant Name: _____ Phone # _____

Mailing Address: _____
Street City/State/Zip

Applicant Signature: _____ Date: _____

Site Address: _____
Street City

To be completed by authorized sewer system personnel:

The above named applicant has submitted a development permit application requiring verification of a valid sewer connection. Please review the information provided and determine if all appropriate fees have been paid and the connection is authorized.

Proposed development _____

Tax Parcel # _____ Site Location _____

System Name: _____

This system has authorized a connection and will provide service to the site and project listed

above: Yes _____ No _____ Connection # (if applicable) _____

This property is located at the address listed at the top of this page. All fees have been paid and the connection is authorized.

Signature/Title: _____ Date: _____
Signature of authorized sewer district employee

Once this section is complete please return this form to Lewis County Community Development at the address located above. Thank you.

To be completed by Permit Technician:

Project Description: _____

Permit/Application # _____

Subdivision/MHP Name: _____

Subdivision/MHP # _____

Lot/Space # _____

PT initials: _____