



Engineering Department
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Application for Temporary Sump Pump Waiver

PLEASE PRINT OR TYPE ALL INFORMATION AND COMPLETE ALL ITEMS ON APPLICATION

Property Owner Name: \_\_\_\_\_ Property I.D. No.: \_\_\_\_\_
Street Address: \_\_\_\_\_ Number of Sump Pump Units: \_\_\_\_\_
Phone No.: \_\_\_\_\_ Email Address: \_\_\_\_\_

Table with 2 columns: Method of Disconnection/Reconnection, Point of Discharge. Rows include Simple Assembly, T-Connection Fixture, T-Valve, Laundry Tub/Wash Basin, Floor Drain, Direct Connection to Sanitary Sewer Pipe.

Criteria for Waiver table with 3 rows of criteria and checkboxes.

Justification of criteria (attach additional information if necessary):

I hereby apply for a sewer use waiver and I acknowledge that the information above is complete and accurate; that I understand this application is not a permit and that no clear water discharge into the municipal sanitary sewer system is allowable without a waiver.

I understand and hereby agree that the use for which the waiver is issued shall be performed according to: (1) Conditions of the waiver; (2) The approved plans and specifications; (3) The applicable City ordinances and codes; and (4) The State building/plumbing codes and regulations.

I understand that the waiver will become null and void if the property under which the waiver is registered is found not to be in conformance with any of the conditions of the waiver.

Property Owner's Signature \_\_\_\_\_ Date \_\_\_\_\_

TO BE COMPLETED BY THE CITY
A waiver is issued for temporary discharge of clear water into the sanitary sewer for the above application. Any conditions/changes are indicated on the application. This connection can be made no earlier than November 15, 2018 and must be removed by March 15, 2019. Failure to remove and properly seal the connection will result in surcharge fee. An inspection will be made by the City after March 15, 2019.

This waiver is issued in accordance with Roseville City Code, Subdivision 802.8.

Issued by Public Works Assistant Director, Jesse Freihammer \_\_\_\_\_ Date \_\_\_\_\_