

Central Contra Costa Sanitary District

5019 Imhoff Place, Martinez, CA 94553-4392

(925) 228-9500 • www.centralsan.org

Date

CCCSD Permit Section CCCSD Inspection Section (925) 229-7371 (925) 229-7373

FOR OFFICE USE ONLY Job# App# Received

Initials

Application for Homeowner Permit

I,, certify that am the owner of the residential
property located at:
I plan to (check as appropriate):
 ☐ Install a side sewer for my new single family residence ☐ Repair or modify the existing side sewer serving my existing single family residence ☐ Install a new side sewer for my existing single family residence
 □ I reside at the above address □ I will reside at the above address □ The above single family residence is an existing rental unit
I certify that all work will be done on private property and I will personally dig the trench and lay the pipe in accordance with Section 5.04.010 of the Central Contra Costa Sanitary District (CCCSD) Code. Any person who aids in undertaking this project will be a volunteer and will not be employed or paid for work undertaken on my behalf. In the event the sewer work requires work in a public right-of-way or on property owned by another, that portion of the work shall be performed by a licensed contractor pursuant to all CCCSD standards. A separate permit from CCCSD is required for work performed by a licensed contractor.
I understand that all work will be subject to inspection by CCCSD and that inspection is to begin on the day the work starts, including trenching. I will request inspection by CCCSD at least 24 hours in advance of starting any sewer work.
I understand that if I do not comply with the terms or conditions of this Homeowner Permit, CCCSD Standard Specifications, and/or CCCSD Code, this Homeowner Permit will be revoked and I will be required to hire a licensed sewer contractor to complete the work under a separate permit from CCCSD. I further understand that I may be required to remove any unauthorized sewer work and have it replaced in accordance with CCCSD standards.
CERTIFICATION
I certify by signing this application that the above information is true and correct and that I agree to the above conditions.
I understand and certify that I shall be entirely responsible for any dangers inherent in the performance of the work and that CCCSD shall not assume responsibility for supervision, or otherwise direct the project. I further understand and certify that CCCSD shall not incur any liability arising from the work undertaken pursuant to this permit, including but not limited to, the supervision of the work, including safety precautions.
Signature Date