

Direct Connection Application Form

Applicant Information

Contact Person: _____

Organization Name: _____

Address: _____

Phone Number: _____

Fax Number: _____

E-mail Address: _____

Description of Project

Location

Requested Date of Connection: _____

Briefly Describe any Unusual Circumstances

Please Include:

- Three copies of plan sheets depicting connection and associated details.
- Connection permit application **in triplicate** with **each copy having an original signature** from City Representative (P.W. Dir., Eng., Manager/Clerk).
- Application fee of \$900, of which \$450 is non-refundable.

Signature: _____

Date: _____

Printed Name: _____

Basis for Fee

The connection permit application fee recovers administrative costs for time spent by MCES staff on a connection permit request (reviewing, modifying, permitting, drawing, and inspecting). Since about half of MCES staff time is spent administering a connection request before the actual connection is made, half of the fee is not refundable regardless of whether or not the connection request is approved.

Please refer to MCES Waste Discharge Rules 301.1 A-F, pages 21 and 22:
<http://www.metrocouncil.org/environment/IndustrialWaste/WasteDischargeRules.pdf>.

Important Information for Completing the Connection Application Form

1. No connection work shall occur until a permit has been issued by MCES. Before completing any forms and paying the fee, call Dan Frey, 651-602-4536, for instructions and additional information.
2. Send the completed Connection Permit Application Form (pages 1-6) to:

Accounts Receivable
Metropolitan Council
390 N. Robert Street
St. Paul, MN 55101-1805

A copy of the Direct Connection Application Form should be accompanied by a \$900 check. Completion of the application form and payment of the fee does not guarantee approval of a connection. Call Dan Frey at 651-602-4536 with any questions about the application form or the required documentation.

3. MCES normally requires approximately 15 days to process a connection application. If approved, a fully executed Connection Agreement must be in place prior to any excavation. Additional cost recovery fees may be added if any unauthorized connection is made that requires additional staff time.

Questions may be addressed to Dan Frey, 651-602-4536, dan.frey@metc.state.mn.us.

For Internal Use Only:

Date Application Received: _____ **Amount Received:** _____
Date Payment Received: _____

PERMIT NO.: _____

INTERCEPTOR: _____

APPLICATION FOR CONNECTION TO OR USE OF
METROPOLITAN COUNCIL ENVIRONMENTAL SERVICES FACILITIES**This form and plans/drawings must be submitted in triplicate to:****Metropolitan Council, Accounts Receivable
390 N. Robert Street, St. Paul, MN 55101-1805
(refer questions to Dan Frey, 651-602-4536)**

The City of _____ hereby applies for a permit for connection to, or use of, Metropolitan Council Environmental Services (MCES) facilities. By execution of this Application, the Applicant agrees to:

1. Provide such additional information as is requested by MCES in order to make a determination on permit issuance.
2. Abide by the permit terms and conditions set forth below and all applicable state and local laws, ordinances, rules and regulations.
3. Pay all applicable permit fees (i.e., Service Availability Charge and Industrial Strength Charge) in accordance with MCES rules and regulations.
4. Reimburse MCES for any damages resulting to MCES facilities as a result of the connection to or use of its facilities.
5. Indemnify and hold harmless MCES, its employees, agents, and contractors from and against all claims, damages, losses and expenses, including but not limited to attorney's fees, arising out of or resulting from the connection to, or use of, MCES facilities, provided that any such claim, damage, loss or expense (1) is attributable to bodily injury, sickness, disease, or death or to injury to or destruction of tangible property, including the loss of use resulting therefrom, and (2) is caused in whole or in part by any negligent act or omission of the Applicant, its contractors, subcontractors, or anyone directly or indirectly employed by any of them, regardless of whether or not it is caused in part by MCES.
6. Construct the connection in accordance with applicable MCES standards.
7. At Applicant's own expense, Applicant will promptly make any repairs necessitated by the failure or malfunction of the connection. MCES will inform Applicant of the necessity of such repair in writing. Applicant will notify MCES at least 48 hours prior to making said repairs. Applicant further agrees that if Applicant fails to make such repair within sixty (60) days of date of written notice by MCES to Applicant of the necessity of such repair, MCES shall make such repair and bill Applicant for the full cost of such repair. Applicant hereby agrees to promptly reimburse MCES for the full cost of any repair made by MCES to remedy a failed or malfunctioning connection.
8. Applicant operates and maintains the connection.
9. Pertinent details of the connection are as follows (see next page):

Exact Location of Connection (i.e., with reference to street intersections, nearest maintenance access structures, etc.): _____

Work to be Done by: _____

Phone No.: _____

Type of Connection: _____

Depth: _____

If connection includes installation of a new on-line M.H., or adjustment to existing M.H. elevation, please complete page 5.

Approx. Date of Connection: _____

Size of Connection Sewer: _____

Pipe Material: _____
(i.e., PVC, DIP, etc.)

Invert Elevation of Connection: _____

Invert Elevation of Existing Sewer: _____

Area Served in Acres: Residential _____ Commercial _____ Industrial _____

Predicted Flow in Gallons Per Day: Initial _____ Design _____

Characteristics of Discharge: Residential _____ Commercial _____ Industrial _____

Unusual Characteristics of Above (Strength, Oils, Chemicals, Temperature, etc.)

This Application is hereby made this _____ day of _____, 20____.

CITY OF _____

BY: _____
(Signature of City Official)

PRINT NAME: _____

TITLE: _____

ADDRESS: _____

PHONE: _____ FAX: _____

INTERCEPTOR: _____ CONSTRUCTION YEAR: _____

ADDRESS OF M.H./FEATURE: _____

DISTANCE TO NEXT UPSTREAM M.H./FEATURE: _____ DOWNSTREAM: _____

Please complete applicable information.

Flow: _____ Surface El.: _____ Invert up: _____ Invert down: _____

Surface Type: Blacktop Concrete Ground Wtr/Swmp Unknown

Cover Type: Non-vented Vented 1 Center pick 2-4 Holes 5 Holes 6 or More Seal tight

Manufacturer & Model No.: _____

Cover: Diameter _____ Thickness _____ MH Type: PC PP BB PIP MH Size: _____

Adjustable Rings: 2" 4" 6" risers Number of Rings: _____

M.H. Steps: Poly/Steel: _____ Aluminum: _____ Cast Iron: _____ NONE: _____

Inlet Sewer

Size: _____ Shape: Circular Arch Egg Elliptical Rectangular Horseshoe

Type: Asbestos Brick/Block Brick/Sdstone Brick/Stone CIP CIPP Conc./Unreinf.
CMP DIP HDPE HDPE/DRLP HDPE/PB HDPE/SL PCCP PIP/Reinf. PIP/
Unreinf PVC PVC/CP PVC/CP/SL PVC/SL RCP RCP/Brick RCP/RSJOINT
RPMP RTRP SJP Steel Stone Stone/Conc./Brkinv VCP VCT

Outlet Sewer

Size: _____ Shape: Circular Arch Egg Elliptical Rectangular Horseshoe

Type: Asbestos Brick/Block Brick/Sdstone Brick/Stone CIP CIPP Conc./Unreinf.
CMP DIP HDPE HDPE/DRLP HDPE/PB HDPE/SL PCCP PIP/Reinf. PIP/
Unreinf PVC PVC/CP PVC/CP/SL PVC/SL RCP RCP/Brick RCP/RSJOINT
RPMP RTRP SJP Steel Stone Stone/Conc./Brkinv VCP VCT

Adjustment to existing M.H. casting elevation: Raise _____ Lower _____

General Comments: _____

Service/Lateral Information

Size: _____ Type: _____ Depth: _____ Flow: _____ Orientation to North: _____

Please attach map showing M.H. location.

PERMIT NO.: _____

**PERMIT
FOR CONNECTION TO OR USE OF
METROPOLITAN COUNCIL ENVIRONMENTAL SERVICES FACILITIES**

It has been determined that Applicant has adopted a comprehensive sewer plan, has submitted it to MCES as required by law, and that the proposed connection to, or use of, MCES facilities conforms to the adopted comprehensive plan or adopted revisions thereof.

Permission is hereby granted to Applicant for connection to, or use of, MCES facilities in accordance with the description provided by Applicant. This permit is issued under the following terms and conditions:

1. The provisions of the Waste Discharge Rules for the Metropolitan Disposal System, Minn. Rules, Chapter 5900, apply to activity carried out under this permit.
2. This permit does not replace permits required by the Minnesota Pollution Control Agency or the necessity of securing other permits and fulfilling requirements of other governmental units.
3. MCES issuance of this permit does not constitute a certification that the project design and construction proposed by Applicant meet engineering standards or local codes. Applicant remains responsible for design and construction, including safety, for the project. Applicant's attention is specifically directed to the confined space rules adopted by the Minnesota Department of Labor and Industry, OSHA Regulations, Parts 5202.100 through 5205.1040 and 5207.0300.
4. The connection shall be constructed in accordance with MCES standards attached hereto [PL(s)_____].
5. This permit shall be null and void if the connection proposed by Applicant is not made within 90 days from the date of issuance, unless an extension is granted by MCES.
6. This permit is subject to modification or revocation and may be suspended at any time for failure to comply with its terms.
7. Record Drawing information provided by MCES is not guaranteed accurate but is included as information available to, and in use by, MCES.
8. Contractor shall take measurements before beginning construction to ensure that service connections shall not cut into maintenance access structure joints or pipe barrel joints. Cutting into joints will not be allowed.
9. Applicant is required to contact MCES 48 hours in advance of the initiation of the connection at telephone number 651-602-8930. Failure to do so will require applicant to pay for all costs associated with re-excavation, inspection, and restorative work.

This permit is hereby approved and issued this _____ day of _____, 20_____.

METROPOLITAN COUNCIL ENVIRONMENTAL SERVICES

BY: _____
Assistant General Manager, Interceptor System