



Medina County Sanitary Engineers

791 W. Smith Road
Medina, Ohio 44256
Office: (330) 723-9581 or (330) 723-9599
Fax: (330) 764-8349

Residential Permit Application

General Information

Services: _____ SEWER _____ WATER

Building Information: (Select Only One)

- _____ New Construction
- _____ Existing Structure
- _____ Building Addition
- _____ New Tennant
- _____ Demolition

Work To Be Completed: (Select Only One)

- _____ New Installation
- _____ Repair
- _____ Abandonment
- _____ Internal Plumbing
- _____ Interior Renovation

Service Address

Address: _____ Municipality: _____
Unit#: _____ Zipcode: _____
Parcel #: _____ City Lot/Sublot: _____
Subdivision: _____

Contact Information

The Contact Name is the person who will be contacted to answer technical questions about the application.

Name: _____
Business: _____
Address: _____
Unit#: _____
City/State/Zip: _____
Email: _____
Phone: _____ Relationship to Owner: _____

Office Use Only

Account#: _____ Location#: _____

Please Enter The Billing Information for either an Individual or Business / Government / Non-Profit Account.

Billing Information		Customer Type: Individual
Please note that the Name is the name that will be placed in our billing system. It will be accountable for all billings at this property.		
Name:	_____	
Address:	_____	
Unit#:	_____	
City/State/Zip:	_____	
Email:	_____	
Phone:	_____	

Billing Information		Customer Type: Business, Government, or Non-Profit
Please note that the Business Name is the name that will be placed in our billing system. It will be accountable for all billings at this property. If the property is owned by a Company, corporation or LLC, please provide the business name as well as the name of a managing partner or employee authorized to make decisions on this account.		
Business Name:	_____	
Authorized Name:	_____	
Address:	_____	
Unit#:	_____	
City/State/Zip:	_____	
Email:	_____	
Phone:	_____	

The applicant acknowledges receipt of procedures to install new sewer and water service connections and agrees to abide by said regulations. Fees quoted by the MCSE's Permit Department are valid for 30 days from date of quote.

Signed by: _____

Date: _____

Office Use Only			
Forms Included With Permit Application			
Sewer Form:	S-1: _____	Calculation Sheet:	Calc-1: _____
Water Form:	W-1: _____	Water Data Sheet:	D-Res: _____
Lot Improvement Map:	_____		
Account#:	_____	Location#:	_____

