



Town of New Paltz Town Clerk  
Rosanna Rosenkranse  
P.O. Box 550  
52 Clearwater Rd.  
New Paltz, NY 12561  
(845) 255-0100  
[clerk@townofnewpaltz.org](mailto:clerk@townofnewpaltz.org)

### **Application for Service Form**

**(New Construction Inspection Permit must be attached to this form before the account is created)**

**Property Owner Information:** (Please print clearly. Will also be used for billing purposes.)

Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**Property Information**

Type: Residential: \_\_\_\_\_ Commercial: \_\_\_\_\_

Service Location: \_\_\_\_\_

S.B.L.: \_\_\_\_\_ Owner Occupied: \_\_\_\_\_ Rental: \_\_\_\_\_

**Service Requested:**

Water: \_\_\_\_\_ Sewer: \_\_\_\_\_

**Applicant Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**For Office Use Only:**

Water: \_\_\_\_\_ District: \_\_\_\_\_ Sewer: \_\_\_\_\_ District: \_\_\_\_\_ Active Date: \_\_\_\_\_

**Meter Info:**

*Meter type and size will be determined by the Water Commissioner. The meter will be purchased by the Town Water Department and charged to the customer at cost.*

Type: \_\_\_\_\_ Size: \_\_\_\_\_ Model: \_\_\_\_\_

Encoder S/N: \_\_\_\_\_ End Point S/N: \_\_\_\_\_ Install Date: \_\_\_\_\_

Gallons: \_\_\_\_\_ Meter Cost: \_\_\_\_\_ Serial Number: \_\_\_\_\_

**Authorization:**

Water Commissioner: \_\_\_\_\_ Date: \_\_\_\_\_

Work may not commence until the application has been reviewed and authorized by the Water Commissioner.  
A copy of this application must be available on the work site while the work is being performed.

Town of New Paltz Water Dept.  
52 Clearwater Road  
PO Box 550  
845-255-5050  
845-255-0191  
Office Hours: Mon-Fri 7am-3:30pm  
[Highways@townofnewpaltz.org](mailto:Highways@townofnewpaltz.org)  
[Highwaysecretary@townofnewpaltz.org](mailto:Highwaysecretary@townofnewpaltz.org)



### Water/Sewer Department Permit Application

Date: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

#### Type of Installation:

##### Water:

\_\_\_\_\_ Service Size

\_\_\_\_\_ Tap Date

##### Sewer:

\_\_\_\_\_ Connection Size

\_\_\_\_\_ Tap Date

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#### Final Approval:

The Above noted work has been installed under the supervision of this department and, at the time of installation, conforms to all rules and regulations for the Water/Sewer district in which it is located.

Date: \_\_\_\_\_ By: \_\_\_\_\_

Title: \_\_\_\_\_

\*\*\*Please make checks payable to the Town of New Paltz Water District\*\*\*

Town of New Paltz Water Dept.  
52 Clearwater Road  
PO Box 550  
845-255-5050  
845-255-0191  
Office Hours: Mon-Fri 7am-3:30pm  
[Highways@townofnewpaltz.org](mailto:Highways@townofnewpaltz.org)  
[Highwaysecretary@townofnewpaltz.org](mailto:Highwaysecretary@townofnewpaltz.org)



### Water/Sewer Department Fees

#### Water User Application Fee

Industrial	\$100
Commercial	\$50
Residential	\$25

#### Sanitary Sewer Permit Fee

Industrial *	\$350
Commercial *	\$200
Residential *	\$25

### New Construction Inspection Fee

#### Water

Industrial	\$200
Commercial	\$100
Residential	\$25

#### Sewer

Industrial *	\$200
Commercial *	\$100
Residential *	\$25

### Service Restoration Fee

#### Water

Industrial	\$100
Commercial	\$50
Residential	\$50

#### Sewer

Industrial *	\$100
Commercial *	\$50
Residential *	\$50

\*Includes connection fee

Respectfully,

Chris Marx, Water Commissioner \_\_\_\_\_

\*\*\*Please make checks payable to the Town of New Paltz Water District\*\*\*

Town of New Paltz Water Dept.

52 Clearwater Road

PO Box 550

845-255-5050

845-255-0191

[Highways@townofnewpaltz.org](mailto:Highways@townofnewpaltz.org)

[Highwaysecretary@townofnewpaltz.org](mailto:Highwaysecretary@townofnewpaltz.org)



## Water and Sewer Department Fees-2022

### Water Service Hook-Up Fee

3/4" meter	\$420
1" meter	\$575
Over 1"	TBD
Sprinkler System Insp	TBD

### Water Meter Replacement Rates, other than normal wear and tear

3/4" meter	\$420
1" meter	\$575
Over 1"	TBD

### Service Restoration Fees - \$50

### Sewer Hook-Up Fee with inspection – non water customer

3/4" meter	\$420
1" meter	\$575
Over 1"	TBD

### Sewer Hook-Up Fee with inspection – existing water customer -\$200

### Sewer Hook-Up Fee with inspection – new construction

3/4" meter	\$420
1" meter	\$575
Over 1"	TBD

## Trenching Not in Roadway

- 1) All trenching will be cleared of all organic matter and stones larger than 1.5"
- 2) Depth of trench will be 3.5-4' in depth Trench will be flat and level to grade
- 3) 6" of compacted sand/stone dust will be used as a base
- 4) 12" of compacted sand/stone dust will be used to cover the service line
- 5) Curb shut offs (see 137-23E) will be placed 30' from center of Road surface. If this is unable to be achieved the water commissioner will designate its placement
- 6) All service lines will be sleeved through foundations
- 7) Back fill to grade will be of material(s) free of stones larger than 1.5"
- 8) All service lines are to be routed in the most direct route possible. If, for any reason, a service line must go under a driveway the line must be sleeved.
- 9) Tapping of a water main will be done by a certified plumber or service. 24 Hour notice will be given to the Water Department before tap is made by calling 845) 255-5050 Proof of insurance and workers compensation must be provided to the town prior to the start of any work
- 10) A Dig Safe must be obtained before work is done by homeowner or contractor
- 11) All costs for installation including any damages to the current water main or fines will be the responsibility of the homeowner and/or contractor. Furthermore if there is any damage to the current water main during installation the homeowner/contractor will be responsible for the cost of any water lost at the current water usage rates.
- 12) Owner and/or contractor is responsible for the cost of the water meter. Type and style to be determined by water commissioner at current prices. A meter is to be installed and programmed by water personnel
- 13) Shut off ball valves will be installed on either side of the meter for repairs and isolation
- 14) All codes will be adhered to that pertain to ¾ residential hook-up

**§ 137-22. Service pipe materials and sizes.**

All water service sizes shall be determined by consultation with the Town and shall be governed by its recommendation.

- A. A minimum of three-fourths-inch diameter for house service will be used.
- B. For services of 3/4 inch to one inch in diameter. Type K soft copper water tubing is required.
- C. For services of 1 1/4 inch to two inches in diameter. Type K soft copper tubing or cold-drawn, semiannealed seamless red brass pipe or two-inch cement line. mechanical joint. cast-iron pipe meeting American Water Works Association specifications may be used.
- D. For services of over two-inch diameter. a minimum of four-inch diameter cast-iron hub and spigot water pipe meeting American Water Works Association specifications with tyton joints shall be used and shall join the main with tapping a sleeve and valve to be installed by the Town Board at the expense of the property owner.

**§ 137-23. Joints and fittings.**

- A. Where Type K soft copper water tubing is used. heavy flared brass fittings as approved by the American Water Works Association shall be used.
- B. Where cold-drawn semiannealed seamless red brass pipe is used. extra-heavy red brass fittings having standard iron pipe threading shall be used.
- C. Where cast-iron pipe, four-inch or larger is used. all fittings must be tyton or mechanical and shall meet specifications of the American Water Works Association.
- D. Except in cases of emergency and to be consistent with the normal length of pipe sections, no joints will be allowed under the road pavement area between the corporation stop connection and the curb stop connection. All services two inches and under shall be connected to the main with a corporation stop tapped directly into the main or tapped through a tapping saddle.
- E. All curb shutoffs on copper and brass services will be of the inverted. ground key. roadway type. Curb shutoffs on cast-iron services will be American Water Works Association approved gate valves.
- F. Curb and valve boxes and manholes providing access to shutoffs shall be of the Town of New Paltz standard.

**§ 137-24. Stop and waste cock.**

A compression stop and waste cock must be located inside the building as near as practicable to the wall where the service pipe enters, and the pipe shall be so arranged that the water can be drawn from them whenever there is danger of freezing.

**§ 137-25. Bypasses and valves.**

Bypasses and the specified valves shall be provided in connection with large meters. as described in connection with the rules relating to meters and their installation.

**§ 137-26. Notice of completion of work.**

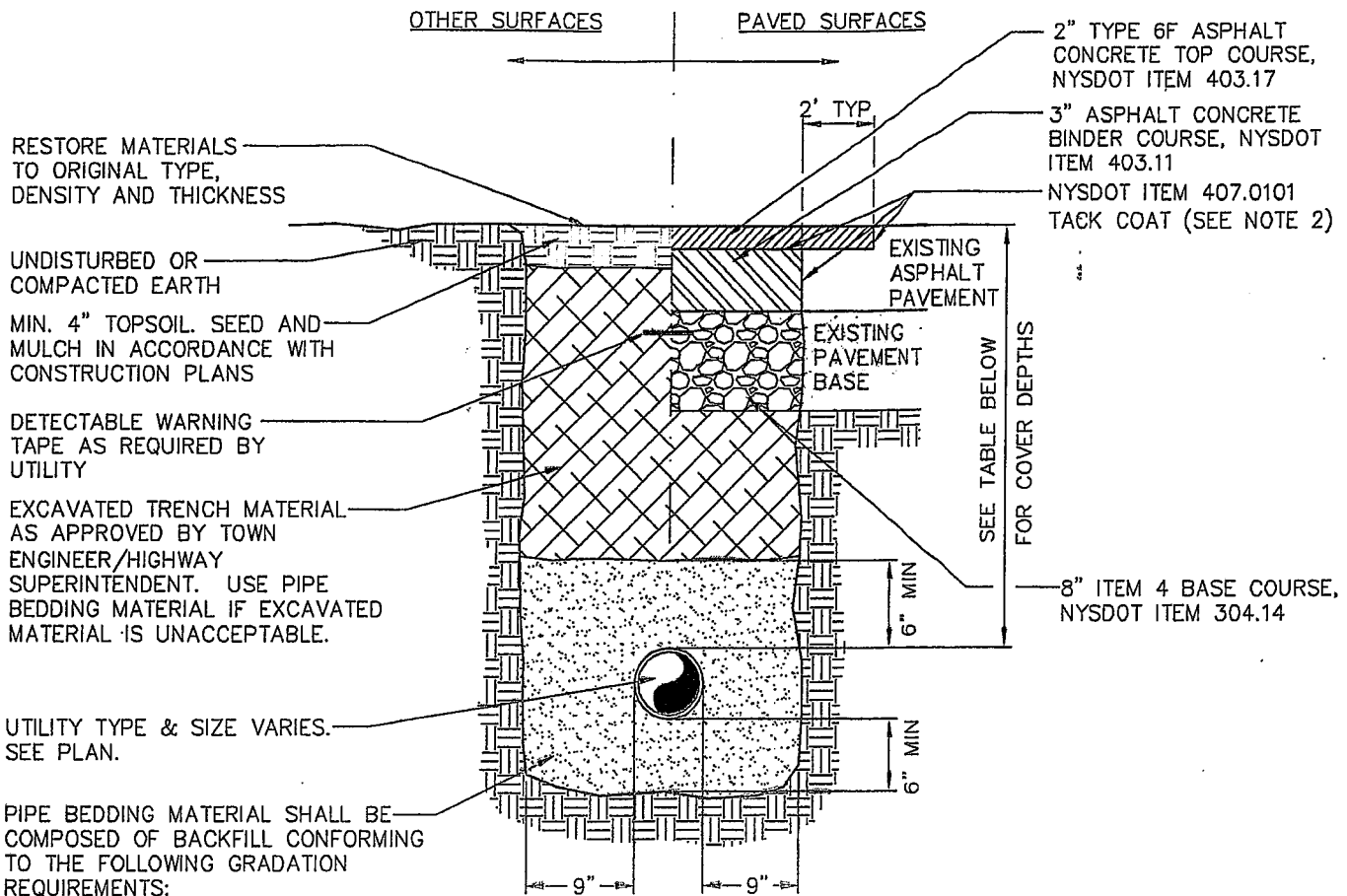
After completion of installation and connection. all services shall be shut off at the curb box and disconnected inside, and notice of such completion shall be filed in the office of the Town Clerk on forms provided therefor.

**§ 137-27. Turning on water.**

After completion of the work and disconnection as provided in § 137-26, no person shall turn on the water until application by the owner of the premises has been filed in the office of the Town Clerk setting forth the purposes for which the water is to be used and written consent therefor given.

**§ 137-28. Replacing service pipes.**

For any service in which any other variety of pipe shall be placed than that specified in §§ 137-21 through 137-27, the Town Board reserves the right to have the water shut off from said premises until such pipe has been installed in accordance with the rules.



SIEVE DESIGNATION	% PASSING
2"	100
NO. 40	0-40
NO. 200	0-10

**SECTION**  
N.T.S.

UTILITY	COVER UNDER PAVED SURFACE	COVER UNDER OTHER SURFACE
GRAVITY SEWER	3'-0"	1'-6"
WATER MAIN	4'-6"	4'-6"
FORCE MAIN	4'-6"	4'-6"
ELECTRIC/CABLE	3'-0"	1'-6"

**NOTES:**

1. ALL TRENCH BACKFILL MATERIAL SHALL BE COMPACTED IN MAX. 6" LIFTS, TO 95% STANDARD PROCTOR DENSITY.
2. REMOVE ALL NONDURABLE PARTICLES, ORGANIC MATTER AND STONES LARGER THEN 1.5"Ø FROM BACKFILL.
3. BOTTOM OF TRENCH WILL BE FLAT AND LEVEL WITH NO LARGE STONES OR UNSTABLE SOILS PRESENT.
4. IF A PAVEMENT JOINT EXISTS WITHIN 3' OF SAW CUT, PAVEMENT SHALL BE REMOVED TO EXISTING JOINT.
5. TACK COAT SHALL BE APPLIED TO ALL EXPOSED EDGES OF PAVEMENT AND BETWEEN EVERY LIFT.
6. ALL PAVEMENT WILL BE COMPACTED IN MAX. 3" LIFTS USING A 10 TON, VIBRATORY ROLLER.
7. ALL WATER MAINS SHALL BE CLASS 52 CEMENT LINED DUCTILE IRON.
8. ALL SANITARY SEWER FORCE MAINS SHALL BE MINIMUM SDR 21 PIPE.
9. ALL GRAVITY SEWER LINES SHALL BE MINIMUM SDR 35 PIPE.
10. ALL DISTURBED AREAS TO BE STABILIZED WITHIN THREE (3) DAYS OF DISTURBANCE.
11. TRENCHING SHALL BE IMPLEMENTED IN ACCORDANCE WITH O.S.H.A. STANDARDS.
12. ALL UNDERGROUND UTILITY INSTALLATIONS SHALL MEET SPECIFICATIONS PER JURISDICTIONAL UTILITY COMPANY.
13. TRENCH SPECIFICATIONS SHALL BE SUBJECT TO CHANGE PER SPECIFIC SITE DESIGN CONSIDERATIONS.



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**UTILITY TRENCH DETAIL**

STANDARD DETAILS  
TOWN OF NEW PALTZ

ULSTER COUNTY, NEW YORK

DATE | DRAWN BY

MLT

PROJECT NO.

15000

SHEET NO.

1



Town of New Paltz Highway Department  
PO Box 550  
1 Clearwater Rd  
New Paltz, NY 12561  
845.255.5050



Application Date: \_\_\_\_\_

## Road Cut Application/Permit

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### Applicant

Bldg Permit # \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone # \_\_\_\_\_

Cellular # \_\_\_\_\_

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### Owner, if other than applicant

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone # \_\_\_\_\_

Cellular # \_\_\_\_\_

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### Location of work

S/B/L# \_\_\_\_\_

Sub-Division: \_\_\_\_\_

Box # \_\_\_\_\_

Road: \_\_\_\_\_

Reason for work: \_\_\_\_\_  
\_\_\_\_\_

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### Disclosure

1. This permit is good for 1 year from the date of application.
2. Applicant is responsible for notifying emergency services and the New Paltz Central School District Transportation, if road will be closed.
3. All work to be done within the regulations of OSHA & MUTCD 2009.
4. Construction will adhere to the detail sheet "Utility Trench Detail"
5. Applicant will post a performance bond in the amount of \$2000.00.
6. An inspection fee of \$150.00 due upon application.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print: \_\_\_\_\_

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### Approval

Peliminary Approval: \_\_\_\_\_ Date: \_\_\_\_\_

Final Approval: \_\_\_\_\_ Date: \_\_\_\_\_

# Application For Approval of Backflow Prevention Devices

**PRINT OR TYPE ALL ENTRIES EXCEPT SIGNATURES**  
Please complete items 1 through 12a + Block and Lot Numbers

Block #

Lot #

**FOR DEPARTMENT USE ONLY**  
Log No.

1. Name of Facility		2. City, Village, Town		3. County	
4. Location of Facility street		city	state	zip	
4a. Phone Numbers		Contact Person			
5. Approx. Location of Device(s)			6. Mfg. Model #		Size of Device(s)
# of Fire Services	# of Domestic Services	# of Combined Services	Total # of Services		Total # of Buildings
7. Name of Owner		Title	Phone Number		8. Nature of works <input type="checkbox"/> Initial Device Installation <input type="checkbox"/> Replace Existing Device 8a. <input type="checkbox"/> New Service <input type="checkbox"/> Existing Service 8b. <input type="checkbox"/> New Building <input type="checkbox"/> Existing Building <input type="checkbox"/> Major Renovation
Full Mailing street		Address			
city		state	zip		
Owner's Signature		Date m / d / y			

9. Name of Design Engineer or Architect		10. NYS License #	
Address street		<input type="checkbox"/> PE <input type="checkbox"/> RA <input type="checkbox"/> Other	
city		10a. Telephone Number(s)	
state		zip	
signature		Date m / d / y	
Original ink signature and seal required on all copies.			
11. Water System Pressure (psi) at Point of Connection Max Avg Min		12. Estimate Installation Cost	
		12a. Estimate Design Cost	
13. Degree of Hazard <input type="checkbox"/> Hazardous <input type="checkbox"/> Aesthetically Objectionable		List of processes or reasons that lead to degree of hazard checked: ..... .....	
14. Public water supply name		Name of supplier's designated representative	
Mailing address street		Title	
city		state	
zip		Signature* m / d / y	
Telephone No. ( )		Date	

Note: All applications must be accompanied by plans, specifications and an engineer's report describing the project in detail. The project must first be submitted to the water supplier, who will forward it to the local public health engineer. This form must be prepared in quadruplicate with four copies of all plans, specifications and descriptive literature.

**TOWN OF NEW PALTZ WATER DEPARTMENT**

**SPECIFICATIONS  
FOR THE INSTALLATION OF  
REDUCED PRESSURE TYPE  
BACKFLOW PREVENTERS  
(FOR SERVICES 2" OR LESS)**

### GENERAL NOTES

1. Backflow Preventers shall be of the Reduced Pressure Principle Type, with sizes as shown in Table 1, and shall be listed as acceptable by the New York State Department of Health, Bureau of Public Water Supply Protection (see Tech. Ref. PWS 14).
2. The most satisfactory installation is in a building or shelter and above ground so that the unit can never be flooded. Basement installation is acceptable when the latter is drained as in (3) below. The backflow preventer must be easily accessible for maintenance and testing. The whole unit should not be concealed, and discharge from the built-in pressure relief valve should be located in a highly visible place. The discharge line must never be piped directly into a sewer, sump or drainage ditch. The discharge may be piped to a visible floor drain or sump. An air-gap must be provided at the backflow preventer if discharge piping is to be provided for the pressure relief valve. There must be at least 18 inches of clearance between the pressure relief valve and the floor.
3. Backflow Preventers should never be placed in the pits, manholes or underground chambers unless absolutely necessary and permitted by local codes. Such chambers should preferably be modified and should drain to the surface of the ground so as to prevent flooding by surface water. Underground chambers should not drain to underground absorption pits and should never be directly connected to any storm or sanitary sewer. Floor drainage capacity shall be as recommended in Table 2.
4. Building or shelter must be heated to prevent freezing.
5. An upstream strainer is recommended in constantly or frequently use lines. A strainer should not be provided in seldom-used or emergency lines (i.e., a fire sprinkler line).
6. Clearances shall be as required by New York State Department of Health local codes, or as shown.

### BACKFLOW DEVICE PLANS & SPECIFICATIONS

The design of the installation must be done by a professional engineer or architect, licensed in the State of New York, in accordance with the requirements of the State Education Law.

- A. Only backflow devices approved by the New York State Health Department are acceptable for installation.
- B. Pit installations are acceptable. However, in the case of reduced pressure zone device, a pit installation is usually not feasible since a gravity drain must be provided which cannot be connected directly to a sewer. The backflow device cannot be subjected to flooding and must be protected from freezing.
- C. The backflow prevention device is to be installed at or as near as possible to the property line. Where possible, the device is to be installed after the meter.
- D. If the water meter has a bypass line around it, the backflow device should be installed beyond the point that the bypass line is tied back into the service. If it is not, the bypass must be protected.
- E. Resilient seated valves are to be installed on both sides of the backflow device.
- F. Strainer should be installed before the device.

INSTRUCTIONS FOR SUBMITTAL OF PLANS USING TYPICAL DRAWINGS

Plan Requirements

4 Sets

1. A site plan sketch must be provided which shows: utilities, property lines, etc.
2. The appropriate drawing for the installation being proposed must be included in the submittal.
3. The NYS approved reduced pressure zone device that is being proposed must be indicated.
4. Gen-236 Form must be completed.