



Midway City Sanitary District
14451 Cedarwood Street, Westminster, CA 92683
www.midwaycitysanitaryca.gov
Phone: 714-893-3553

Sewer Connection Permit Application

MCS D Initial Fee: \$200.00 (Due Prior to Review)

APN #: _____ Permit #: _____

MCS D Initial Fee: _____ **\$200.00**

MCS D Additional Permit Fees: _____

OCSD Permit Fees: _____

TOTAL FEES: _____

BUILDING ADDRESS (Main Property Address):

NEAREST CROSS STREET: _____

CITY: _____

OWNER: _____ PHONE NUMBER: _____

Orange County Contractor's License #: (if applicable) _____

I hereby acknowledge that I have read this application and state that the above is correct and agree to comply with all District and County ordinances and State Laws regulating plumbing. I certify that I possess the above valid Orange County license, or I am the legal owner of the residential property described above.

Signature of Permittee

Signature Date

District Remarks:

Date and Time
Application Received