# WASHINGTON TOWNSHIP
# MUNICIPAL UTILITIES AUTHORITY
Morris County, NJ

## APPLICATION FOR CONNECTION TO WASTEWATER AND POTABLE WATER FACILITIES

1. Applicant:

   Name:_____ Telephone No.:_____

   Address:_____

   Contact person:_____

2. Owner:

   Name:_____ Telephone No.:_____

   Address:_____

3. Location of Property:

   Street Address:_____

   Block(s):_____ Lot(s):_____ Tax Map(s):_____

4. Type of Application:

   ___ Single Family Home Existing? Yes___ No___

   ___ Commercial Facility Existing? Yes___ No___ Square footage _____

   ___ Industrial Facility Existing? Yes___ No___ Square footage _____

   ___ Other _____

5. Service Type:

   ___ Water Service

   ___ Sewer Service

6. Development Information (if applicable):

   Area of Tract _____ Acres

   New Roadways Proposed? Yes ___ No ___

   Facilities Proposed _____

   _____

7. Status of Application (development):

   Anticipated Start Date: _____ Completion Date: _____

   ___ Minor Subdivision Number of Lots ___

   Planning Board: Application Filed (Date): _____

   Application Approved (Date): _____

___ Major Subdivision Number of Lots ___

Planning Board: Preliminary Plat Filed (Date): _____

Preliminary Plat Approved (Date): _____

Final Plat Filed (Date): _____

___ Commercial or Industrial Facility:

Planning Board: Site Plan Filed (Date): _____

Site Plan Approved (Date): _____

8. Prior Application:

Has an Application for Service been filed for this property previously?

Yes ___ No ___ If yes, Date of prior filing _____

Applicant at prior filing _____

9. Construction Permit Fees: **Please refer to the WTMUA's Rules & Regulations - Appendix A for the latest fees.**

| | | |
|---|---|---|
| Application Fee | Water _____ | Sewer _____ |
| Review Fee or Deposit | Water _____ | Sewer _____ |
| Inspection Fee or Deposit | Water _____ | Sewer _____ |
| Connection Fee | Water _____ | Sewer _____ |
| Tie-in Bond | Water _____ | Sewer _____ |

Signature of Applicant:_____ Date _____

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FOR OFFICE USE

Date Received _____

Total Fee _____ Amount Received _____

Plans Received? Yes ___ No ___

Rules and Regulations Issued? Yes ___ No ___

Received by: _____

Title:_____

Permit Issue Date: _____ Permit Number: _____

Signature: _____

Title: _____