

THE EVESHAM MUNICIPAL UTILITIES AUTHORITY
Evesham Township Municipal Complex
100 Sharp Road
Evesham, New Jersey 08053
(856) 983-1878

APPLICATION FOR APPROVAL OF SEWER CONSTRUCTION PLANS

1. Name of Applicant: _____
Address: _____

Telephone No.: _____
2. Name of Owner: _____
Address: _____

3. Name of Development: _____
4. Section Number: _____
5. Number of Proposed Lots to be Serviced: _____
6. Status of Planning Board Application for Property Described in this Application:

(ATTACH COPY OF FINAL PLANNING BOARD APPROVAL RESOLUTION)

7. Describe Proposed Sewer System and Appurtenances:

Description	Estimated Cost

8. List Titles of Plans Accompanying this Application:

9. Name and Address of Surety Company posting Performance Bond:

(Continued on Back)

10. Attached to this Application are checks made payable to the Evesham Municipal Utilities Authority for the Application fee of \$20.00 and for initial escrow fees in the amount of \$_____.

11. INSTRUCTIONS TO APPLICANTS:

- A. Attach six (6) copies of sewer construction plans to this application.
- B. There is an application fee for each S-3 application in the amount of \$20.00 which is payable herewith by separate check.
- C. Initial escrow fees shall be posted, by separate check, according to the following schedule:
 - a) 8-inch sewer line - \$0.08 per foot.
 - b) sewer lines in excess of 8 inches - \$0.12 per foot.
 - c) sewer system appurtenances - two (2%) percent of estimated cost of construction as determined by EMUA.
 - d) inspection fees - six (6%) percent of estimated cost of construction as determined by EMUA.

NOTE: Initial escrow fees not to exceed \$5,000 for property referred to in this Application.

- D. Upon final approval of the Authority and Engineer, Applicant will submit plan of sections showing tax lot and block number with a cross-indexed street address list.

I have read the foregoing instructions and understand them. My check for the escrow fee is attached. I understand that this application is not complete and will not be considered by the EMUA without the payment of this fee. I certify that the statements made by me in this application are true.

APPLICANT:

(Signature)

(Type or Print Name and Title)

Date: _____

FOR EMUA USE ONLY:

CERTIFIED AS COMPLETED ON: Date: _____

APPROVAL BY EMUA CONSULTING ENGINEER: Date: _____

Estimated Cost: \$_____ Signature: _____

ACTION BY EMUA: Approved: _____ Disapproved: _____

Reasons for Disapproval: _____

Date: _____ Signature: _____