

**BORDENTOWN SEWERAGE AUTHORITY
P.O. BOX 396
954 FARNSWORTH AVENUE
BORDENTOWN, NEW JERSEY 08505**

APPLICATION FOR APPROVAL OF SEWER CONSTRUCTION PLANS

1. Name of Applicant _____
Address _____

Telephone _____

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 _____

7. Describe Proposed Sewer System and Appurtenances:

Description	Estimated Costs
1. _____	\$ _____
2. _____	\$ _____
3. _____	\$ _____
4. _____	\$ _____
5. _____	\$ _____
6. _____	\$ _____
7. _____	\$ _____
8. _____	\$ _____
9. _____	\$ _____
10. _____	\$ _____

8. List Titles of Plans Accompanying this Appurtenances:

9. Name and Address of Surety Company Posting Performance Bond

S-3 Application

10. Attached to this application is a check made payable to the Bordentown Sewerage Authority for S-3 Application Filing Fee in the amount of \$35.00. This fee is non-refundable.

I certify that the foregoing statements made by me are true.

Applicant Signature

Date

Typed/Printed Name

INSTRUCTIONS TO APPLICANTS:

1. This form is to be submitted in triplicate with a payment \$35.00 for the S-3 application filing fee.
2. Attach three (3) copies of all sewer construction plans for other than single family homes to this application. Single family homes only require one (1).
3. Maintain Minimum S-1 Initial Review Fee Escrow balance
 - Change of Use: \$2,000.00
 - Single Family Dwelling Connection: \$4,000.00
 - All Other Applications: \$5,000.00
4. Estimated inspection fees at the rate of 6% of Engineer's Estimated Cost of Improvements including mains, laterals, manholes, pumping stations and/or treatment works, and miscellaneous sewerage appurtenances.

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 BSA without the payment of this fee.

Applicant Signature

Date

Typed/Printed Name

CERTIFIED AS COMPLETE ON: _____ DATE: _____

RECOMMENDATION OF BSA CONSULTING ENGINEER: _____ DATE: _____

APPROVED: _____ DISAPPROVED: _____ SIGNATURE: _____

ACTION BY BSA: APPROVED: _____ DISAPPROVED: _____

REASON FOR DISAPPROVAL _____

DATE: _____ SIGNATURE: _____

TITLE: _____

BSA Representative