

MONROE TOWNSHIP UTILITY DEPARTMENT 143 UNION VALLEY ROAD, MONROE TWP., NJ 08831 SEWER SERVICE - TENTATIVE APPLICATION

APPLICATION NUMBER

DATE FILED

APPLICATION FOR TENTATIVE APPROVAL OF PLANS FOR SEWER SERVICE FOR SUBDIVISION OR OTHER DEVELOPMENT IN THE TOWNSHIP OF MONROE, COUNTY OF MIDDLESEX, STATE OF NEW JERSEY.

This application must be completed and filed in <u>duplicate</u>, accompanied by the appropriate fee as per Rules and Regulations with the Utility Department

Application is hereby made for a tentative approval of plan of sewer system and appurtenances.

APPLICANT INFO.					OWNER INFO. (if different from applicant)				
Applicant Name:					Own	er Name:			
Address:						Address:			
Phone #						Phone #			
Preliminary Application # Approva			val Date:						
Does the Tentative Plan follow the Preliminary Plan in regard to Lot Layout and Area Covered? Yes No									
If "no", indicate changes and reason for change:									
Number of units proposed for Tentative Approval:						Des	cribe your proposa	al for sewer se	ervice
Name and Profess Name: Profession: Address: Phone #	sion of pe	erson designing s	ewer syster	m					
Engineer's Estimate, including As-Built Plans: \$									
Application Fee:	\$								
List plans and other material accompanying application and number of each									
Item Number									
a.									
b.									
C.									
d.									
е.									
f.									

FORM S2 TENTATIVE SEWER APPLICATION-Con.

Attach 2 prints of your Tentative plan.										
Federal Identification or Social Security Number:										
Applicant Signature :	Date:									
Owner Signature :	Date:									
Make all checks payable to the Monroe Township Utility Department										
(This Costion for Department Has Only)										
(This Section for Department Use Only)										
Date received and fee collected:										
Fee Paid: \$ Date:										
Action of the Monroe Township Utility Department:										
Date: Approved Approved Conditionally Disapproved										
Recommendation of the M.T.U.D.										
Recommendation of the M.T.U.D. Engineer										
Date:										
Authorized M.T.U.D. Signature	Date:									