



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

<b>APPLICATION NUMBER</b>
<b>DATE FILED</b>

APPLICATION FOR TENTATIVE APPROVAL OF PLANS FOR WATER 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 duplicate, accompanied by the appropriate fee as per Rules and Regulations with the Utility Department

Application is hereby made for tentative approval of water service plans and appurtenances.

APPLICANT INFO.		OWNER INFO. (if different from applicant)	
Applicant Name:		Owner Name:	
Address:		Address:	
Phone #		Phone #	

Preliminary Application No.	
-----------------------------	--

Prelim. Approval date:	
------------------------	--

Does the Tentative Plan follow the Preliminary Plan in regard to Lot Layout and Area Covered?
---

<input type="checkbox"/> Yes	<input type="checkbox"/> No
------------------------------	-----------------------------

If No, indicate changes and reason for changes:	
---	--

Number of units proposed for Final Approval	
---	--

Name and Profession of person designing water system	
Name:	
Profession:	
Address:	
Phone #	

Describe your proposal for water service:	
---	--

Estimated cost of construction:	\$
---------------------------------	----

Application Fee:	\$
------------------	----

List plans and other material accompanying application and number of each	
<u>Item</u>	<u>Number</u>
a.	
b.	
c.	
d.	
e.	
f.	

Attach 2 prints of your tentative plan.

Applicant Signature :		Date:
-----------------------	--	-------

Owner Signature :		Date:
-------------------	--	-------

**Make all checks payable to the Monroe Township Utility Department**

---

**(This Section for Department Use Only)**

Date received and fee collected

Fee Paid: \$		Date:	
--------------	--	-------	--

Action of the Monroe Township Utility Department:

Date:		<input type="checkbox"/> Approved	<input type="checkbox"/> Approved Conditionally	<input type="checkbox"/> Disapproved
-------	--	-----------------------------------	---	--------------------------------------

Recommendation of the Utility Department	
--	--

Authorized M.T.U.D. Signature		Date:	
-------------------------------	--	-------	--