

APPLICATION FOR REVIEW OF FINAL PLANS
FOR
SEWERAGE FACILITIES

Application No. _____

Filed: _____

THE LAKEWOOD TOWNSHIP MUNICIPAL UTILITIES AUTHORITY
LAKEWOOD, NEW JERSEY

This Application must be filed, in duplicate, with the Secretary of the Authority and shall be accompanied by an Application Fee of One Hundred (\$100.00) Dollars as well as the review deposit determined in accordance with the Review Deposit Schedule, which will be used to cover the Engineering cost involved in review.

Application is hereby made for review and approval of final plans for the construction of sewerage facilities.

1. Applicant's Name: _____
Address: _____ Phone: _____
2. Name and address of present owner if other than above: _____

3. Location of Proposed Construction:
Street: _____ Tax Map Block No. _____
4. Number of Proposed Units to be Sewered: _____
5. Name and Profession of Person Designing Plans:
Name: _____ Profession: _____
Address: _____ Phone: _____
6. Development Plans:
(a) Sell Lots Only (Yes or No) _____
(b) Construction of House for Sale (Yes or No) _____
(c) Other: _____

7. Does applicant have title in order to convey by deed to The Lakewood Township Municipal Utilities Authority, easements to all areas showing sanitary sewage facilities and all rights to the sewer system:

8. Does applicant have financial capacity to post Performance Bond and Maintenance Guarantee:

(Yes or No) _____

9. List plans and other supporting data accompanying this application:

a) _____

b) _____

c) _____

d) _____

e) _____

f) _____

10. Preliminary Application No. _____

Date Approved: _____

11. Does the final plan follow exactly the technical plans approved by the Authority?

(Yes or No) _____

If no, indicate changes:

12. Date of filing final plan with Lakewood Township Planning Board:

13. Applicant Engineer's estimate of entire construction costs, including as-built plans:

\$ _____

14. Calendar days required to complete the entire project, after approval is granted:

Signature of Applicant

Date

MAKE ALL CHECKS PAYABLE TO "THE LAKEWOOD TOWNSHIP MUNICIPAL UTILITIES AUTHORITY".

For Official Use Only

Date Received and Fee Collected by Secretary:

Date: _____ Application Fee: _____

Review Fee: \$ _____

Date: _____ Performance and Maintenance Guarantee \$ _____ (Cash)
_____ (Bond)

Easement Received _____

Engineering and Inspection Fees Received: \$ _____

Date of Approval by Planning Board _____

Last Revision Date on Drawings _____

Engineer's Review Remarks: _____

ACTION OF THE LAKEWOOD TOWNSHIP MUNICIPAL UTILITIES AUTHORITY

Review Remarks: _____

Approved: _____ Disapproved: _____

Recommendations: _____

Secretary

Date