

FINAL SEWER
APPLICATION NUMBER _____

FILED _____

**LITTLE EGG HARBOR MUNICIPAL UTILITIES AUTHORITY
P.O. BOX 660, 823 RADIO ROAD
LITTLE EGG HARBOR, NEW JERSEY 08087**

Application for Final approval of Sanitary Sewers and Appurtenances in the Township of Little Egg Harbor, County of Ocean, State of New Jersey.

This application must be filed with the Authority, twenty-one (21) days in advance of a regular meeting of the Authority. This Application must be filed in duplicate, accompanied by a fee of one (1%) of the Applicant's Engineer's estimate of the entire cost of construction, including the rights of way, and "as built" plans to be approved by the Authority's Engineer, or a minimum fee of \$ 500.00. Application is hereby made for Final Approval of Sanitary Sewer and Appurtenances.

1. Applicant's Name _____ Tax ID# _____

Address _____ Phone # _____

2. Name and Address of present owner, if other than #1 above

Name _____ Tax ID # _____

Address _____ Phone # _____

3. Preliminary Application Numbers _____ Date Approved _____

4. Tentative Application Number _____ Date Approved _____

5. Does the Final Plan follow exactly the Tentative Plan in regard to details and area coverage? _____

6. Date of filing Final Plan with The Little Egg Harbor Township Planning Board _____

7. Number of proposed lots to be served _____

8. Applicant's Engineer's estimate of entire cost of construction including rights - of - way, and easements

\$ _____

9. Applicant's Attorney (In accordance with the Laws of the State of New Jersey an Applicant other than an individual must be represented by an attorney) _____

10. Calendar days required, after approval is given by the Authority to complete the entire job _____

11. List plans and other material accompanying application and number of each:

a. _____

b. _____

c. _____

- d. _____
- e. _____
- f. _____

12. Attach 3 black on white prints of your Final plan

SIGNATURE OF APPLICANT

Make all checks payable to: **Little Egg Harbor Municipal Utilities Authority**

Office use only

Date received and fee collected by the Authority _____, _____

Date

Amount Paid

Action of the Little Egg Harbor Municipal Utilities Authority

Date _____ Approved _____ Disapproved _____

Recommendation of the Authority _____

Little Egg Harbor Municipal Utilities Authority's Engineer's comments:
