

The Jackson Township Municipal Utilities Authority

EXHIBIT: A

135 Manhattan Street
Jackson, NJ 08527
Telephone: (732) 928-2222
Fax: (732) 928-5171

Statement of Utility Services

Applicant: Name: _____ Bus Tel No: _____
Address: _____ Res Tel No: _____
_____ Fax No: _____

Property in Question:

Address: _____
Block: _____ Lot: _____
Qual: _____

Check One:

_____ Single Family Residence _____ Minor Subdivision
_____ Commercial _____ Major Subdivision -
(3 or more homes)

Comments/Questions: _____

(Do not write below this line.)

JTMUA: Tax Map Drawing No. _____
_____ Water _____ Sewer

1. Utility Service can be provided.
Application for Service is **REQUIRED.**

Connection can be provided as follows:

Water _____
(Street)

Sewer _____
(Street)

2. Utility Service cannot be provided at this date.

Application for extension is required: _____
____ Yes ____ No

3. Utility Service cannot be provided at this date.

It shall be available upon completion of work by a developer under application no. _____. Contact the Authority to confirm availability of services.

4. Utility Service is provided.

Comment: _____

Date: _____

Signed: _____

Note: Statement is good for one year.

Jackson Township MUA