



JACKSON TOWNSHIP MUNICIPAL UTILITIES AUTHORITY

135 Manhattan Street • Jackson • New Jersey 08527
Telephone: 732-928-2222 • Facsimile: 732-928-5171 • www.jacksonmua.com

Application for Review of Final Plans for Utility Services

Water _____ Sewer _____ Water & Sewer _____

1. Design Engineer:

Name _____

Address _____

Phone no. _____ Email _____

2. Development Plans:

Total Estimated Water Consumption _____ GPD

Project Name: _____

3. Property Location:

Street _____

Block(s) _____ Lot(s) _____

4. Owner/Applicant:

Name _____

Address _____

Phone no. _____ Email _____

5. Developer: (If Other Than Applicant)

Name _____

Address _____

Phone no. _____ Email _____

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For JTMUA use only

Fees:

A. Application

Subdivision

of Proposed Units _____

Per Unit X \$25.00 _____

Application Fee _____ (Min \$200)

-OR-

Commercial - *Site Plan*

GPD/Authority's Calculated EDU= _____ EDU

EDU X \$25.00 _____

Application Fee _____ (Min \$1000)

B. Review

Subdivision

of Proposed Units _____

Per Unit X \$25.00 _____

Review Fee _____ (Min \$500)

-OR-

Commercial - *Site Plan*

Square feet _____

One (1) sq ft X \$0.15 _____

Review Fee _____ (Min \$500)

C. Inspection Escrow: 5% of Construction Cost

Please make sure to submit the following:

- One (1) check for Final Application fees and one (1) check for Final Review fees
- Make all checks payable to "JTMUA" or Jackson Township Municipal Utilities Authority
- One (1) paper and one (1) electronic set of detailed documents, permits and specifications are required with this application
- Complete Revised documents as required in Tentative approval
- Copies of all outside agency permits

See www.jacksonmua.com **Rules and Regulations for complete list of items needed for submittal.**

To submit electronic application packet see www.jacksonmua.com Rules & Regs or Forms & Links

An administratively complete electronic and hardcopy Application packet must be submitted no later than the 1st of the month for consideration at that months' Authority meeting.

Send Completed Form with Required Attachments to:

Jackson Township MUA
135 Manhattan Street • Jackson • New Jersey 08527

Applicant (Signature)

(Type or Print Name and Title)

Date _____