

THE CITY OF BORDENTOWN
Water Department
324 Farnsworth Avenue
Bordentown, New Jersey 08505
(609) 298-2121 ext. 5

APPLICATION FOR WATER SERVICE

1. Name of Applicant: _____
 Address: _____

 Telephone No.: _____ Fax No.: _____
2. Name of Owner: _____
 Address: _____

3. Interest of the Applicant, if other than as the owner: _____

4. Name of Development: _____
5. Location of Development: _____
6. Status of Planning Board Application: _____

7. Number of Proposed Lots to Be Serviced: _____

8. Schedule of Development (list chronologically)

Estimated Connection Date	Section Number	Number of Units	Number of EDU's	Type of Unit

TOTAL NUMBER: _____ units _____ EDU's

9. Applicant's Consulting Engineer: _____

Address: _____

Telephone No.: _____ Fax No.: _____

10. Name and Address of Surety Company posting Performance Bond:

11. Title of Plans Accompanying this Application:

12. Instructions To Applicants:

- A. Submit this form in triplicate.
- B. Attach four (4) copies of all conceptual engineering plans to this application.
- C. Provide the application fee for this W-1 application in the amount of \$125.00. This fee is payable at the time this application is submitted and is non-refundable.
- D. Provide the conceptual review fee in the amount of \$25.00 for each equivalent dwelling unit (EDU) receiving water service, as calculated in item 13 below. This fee is payable at the time this application is submitted and is non-refundable.

13. Equivalent Dwelling Unit (EDU) Calculations:

Single family home, townhouse, condo, apartment or mobile home -1 EDU per unit
Office space - $(0.110 \text{ GPD} \times \# \text{ of sq. ft.}) \div 175 \text{ gpd} = \# \text{ of EDU's}$
Warehouse space - $(0.022 \text{ GPD} \times \# \text{ of sq. ft.}) \div 175 \text{ gpd} = \# \text{ of EDU's}$
Other uses – $\text{GPD as per N.J.A.C. 7:14A-23.3} \times 1.15, \text{ or as otherwise established by the City} \div 175 \text{ gpd} = \# \text{ of EDU's}$

14. Attached to this application is a check made payable to The City of Bordentown for the application fee in the amount of \$125.00 and the conceptual review fee in the amount of \$_____ per item 12.D above, for a total of \$_____.

I have read the foregoing instructions and understand them. I understand that this application is not complete and will not be considered by the City without the payment of the application fees. I hereby certify that the statements made by me in this application are true.

APPLICANT:

(Signature)

Date: _____

(Type or Print Name and Title)

FOR CITY USE ONLY:

APPROVAL BY CITY WATER DEPARTMENT CONSULTING ENGINEER:

Date: _____

Signature: _____

ACTION BY CITY: Approved: _____ Disapproved: _____

Reasons for Disapproval: _____

Date: _____

Signature: _____