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)

<table>
<thead>
<tr>
<th>Estimated Connection Date</th>
<th>Section Number</th>
<th>Number of Units</th>
<th>Number of EDU's</th>
<th>Type of Unit</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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 GPD x # of sq. ft.) ÷ 175 gpd = # of EDU’s
Warehouse space - (0.022 GPD x # of sq. ft.) ÷ 175 gpd = # of EDU’s
Other uses - GPD as per N.J.A.C. 7:14A-23.3 x 1.15, or as otherwise established by the City) ÷ 175 gpd = # 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:____________________________________