



BOROUGH OF BLOOMINGDALE

101 HAMBURG TURNPIKE • BLOOMINGDALE, NEW JERSEY 07403
(TEL) 973-838-0778 (FAX) 973-838-5115

APPLICATION FOR SEWER CONNECTION

Property Address: _____

Owner/Applicant: _____ Approved Contractor: _____

Name: _____ Name: _____

Address: _____ Address: _____

Daytime Phone Number: _____

Daytime Phone Number: _____

Fees:

Application:

Residential Dwelling Unit \$25.
Businesses & Institutions \$50.
Industrial Establishments \$100.

Application Fee Paid: _____
Check #: _____

Connection Fee Paid: _____
Check #: _____

<u>Connection</u>	<u>Tap</u>	<u>Connect</u>	<u>Total</u>
4 inch	\$1,200.	\$6,000.	\$7,200.
6 inch	\$1,800.	\$8,000.	\$9,800.
8 inch	\$2,200.	\$10,000.	\$12,200.

All applicable permits must be obtained and fees paid by the applicant before beginning any work. At least seventy-two (72) hours notice, excluding Saturdays, Sundays and municipal holidays shall be given to the Water and Sewer Utility Services before any connection is to be made. The Water & Sewer Services shall inspect and approve all applicable permits, road opening and materials used to make any connection. The connection charges listed above are for the privilege of tapping of the main trunk line and connection thereto only. The applicant is responsible for the total cost of all road openings and materials that are needed to restore the road back to its proper condition. Signing of the application shall signify assent to the rules, regulations and schedule for sewer rates, fees and charges of the sewer department then or thereafter in effect. Copies of existing user rules, regulations, rates and charges shall be available for inspection at the office of the Water and Sewer Utility Services.

Signature: _____
Applicant

Signature: _____
Contractor

Construction Dept. Plumbing Permit No.: _____

Road Opening Permit No. _____

Approval: _____ Date: _____

By: _____

Completed: _____

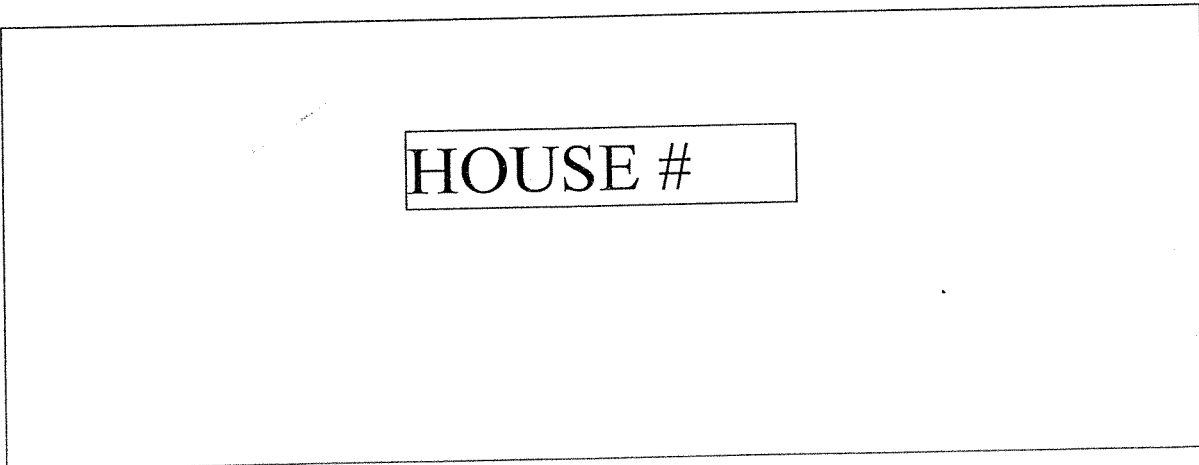
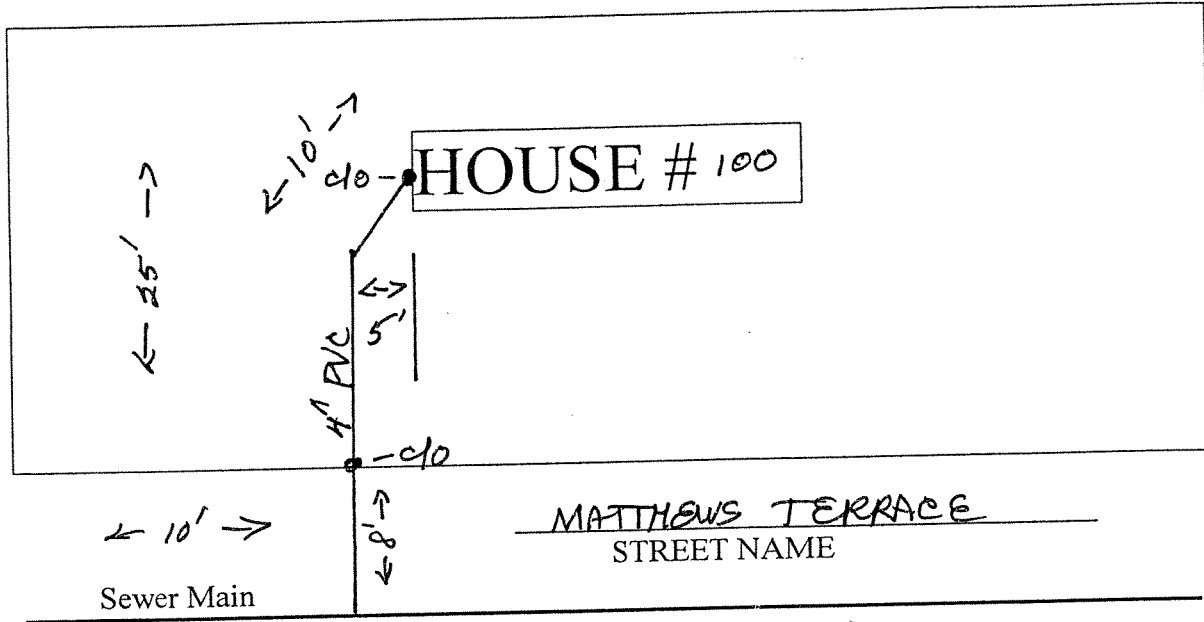
Account No. _____

Final Inspection: _____

Meter No. _____

Cc: Board of Health
Construction Department

SAMPLE



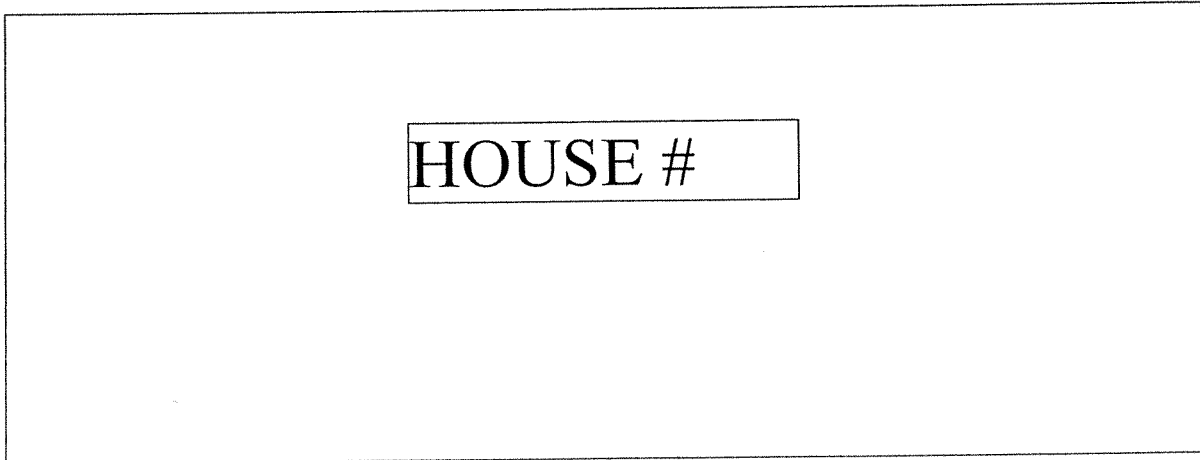
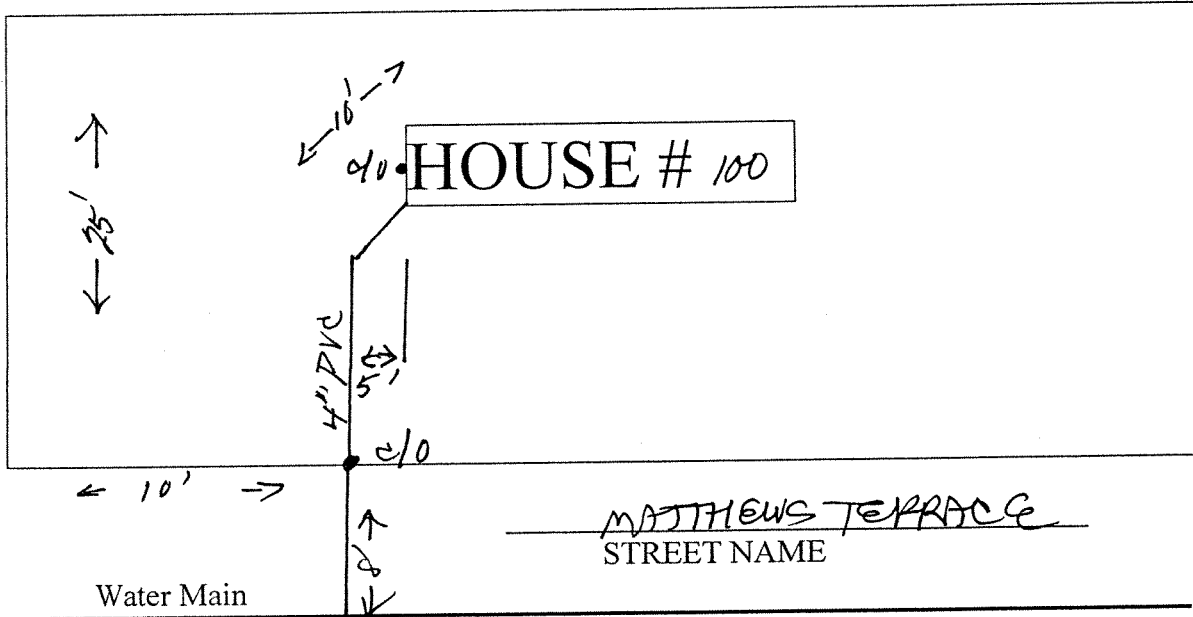
STREET NAME

Sewer Main

Please indicate the proposed location for your sewer service on this sketch. Be sure to include clean-outs, pipe size and approximate distance measurements as shown in the sample above.

Owner Signature: _____ Date: _____

SAMPLE



STREET NAME

Water Main

Please indicate the proposed location for your water service on this sketch. Be sure to include clean-outs, pipe size and approximate distance measurements as shown in the sample above.

Owner Signature: _____

Date: _____