



**APPLICATION FOR THE APPROVAL OF  
PLANS AND SPECIFICATIONS  
FOR THE CONSTRUCTION OF SANITARY SEWER FACILITIES**

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Applicant's Name: \_\_\_\_\_

Address: \_\_\_\_\_

Listed Telephone Number: \_\_\_\_\_

Location of Project:  
Tax Map Sheet No(s) \_\_\_\_\_ Lot(s) \_\_\_\_\_ Block \_\_\_\_\_

Number of Proposed:

- \_\_\_\_\_ Single Family Residential Lots
- \_\_\_\_\_ Townhouses
- \_\_\_\_\_ Apartments
- \_\_\_\_\_ Industrial Lots
- \_\_\_\_\_ Commercial Units (Offices, Stores, Etc.)
- \_\_\_\_\_ Restaurant/Bar – Square Footage
- \_\_\_\_\_ Hotel – Number of Rooms
- \_\_\_\_\_ Laundry Facility - # of washers : \_\_\_\_\_

Number of Sewer Connections to Parent System \_\_\_\_\_

Number of Proposed Manholes \_\_\_\_\_

Proposed Sewer Main Size	Linear Feet
_____	_____
_____	_____
_____	_____

Estimated Average Daily Flow \_\_\_\_\_ gallons per day



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Estimated Cost of Sewer Improvements \$ \_\_\_\_\_

Water Source: \_\_\_ NJ American Water \_\_\_ Well \_\_\_ Other

Name of Professional Engineer Preparing the Plans for the Applicant:

\_\_\_\_\_

Address: \_\_\_\_\_

Telephone No: \_\_\_\_\_ N.J. License No. \_\_\_\_\_

Applicant's Signature

\_\_\_\_\_

Typed Signature

\_\_\_\_\_

Position: \_\_\_\_\_

Date: \_\_\_\_\_

Do Not Write Below Line

Application No. \_\_\_\_\_ Date Filed \_\_\_\_\_

Application Fee Received \$ \_\_\_\_\_

Date \_\_\_\_\_ Signed \_\_\_\_\_

Title \_\_\_\_\_

Hillsborough Municipal Utilities Authority
P. O. Box 5909
Hillsborough, NJ 08844
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