

**LOWER BUCKS COUNTY JOINT MUNICIPAL AUTHORITY
WATER AND/OR SEWER SERVICE CONNECTION PERMIT APPLICATION**

NON-REFUNDABLE APPLICATION FEES:

RESIDENTIAL: \$150.00 per connection

COMMERCIAL: \$200.00 per connection

1. NAME OF PROJECT:

2. LOCATION OF PROPOSED SERVICE(S):

Address: _____

City/Municipality: _____

Tax Parcel No(s): _____

If Residential/Commercial Development, please attach street addresses and lot numbers on a separate sheet of paper

3. OWNER:

Name: _____

Address: _____

City, State, Zip: _____

Telephone Number: _____

Email address: _____

4. EQUITABLE OWNER:

Name: _____

Address: _____

City, State, Zip: _____

Telephone Number: _____

5. CONTRACTOR INFORMATION:

*General Contractor Name: _____

Address: _____

City, State, Zip: _____

Telephone Number: _____

*Plumber Name: _____

Address: _____

City, State, Zip: _____

Telephone Number: _____

***Current copy of township license shall be submitted with application before review process may begin**

Engineer/Architect (if applicable) _____

Address: _____

City, State, Zip: _____

Telephone Number: _____

6. STATUS OF SERVICE (check all that apply):

- () New () Temporary () Relocation () Bulk Water or Sewer Service
() Connection to the Authority's Existing Water and/or Sanitary Sewer Main
() Extension of the Authority's Water and/or Sanitary Sewer Main
() Connection to the Authority's Water Distribution System and/or Sanitary Sewer System through the Connection of a Privately Owned Water/Sewer Main

7. TYPE OF OCCUPANCY (check one):

() COMMERCIAL: CHECK ONE: () RETAIL () RESTAURANT () OTHER _____

() INDUSTRIAL; provide a brief description: _____

() RESIDENTIAL; CHECK ONE: () Construction of New Single Residential Dwelling Unit

() Addition to the existing Residential Dwelling Unit

() Multiple Dwelling Units, total number of units proposed _____

8. CONSTRUCTION INFORMATION:

The proposed/existing house or building is/or will be constructed with a:

() Full basement () Half basement () Crawl Space () Slab on grade

Elevation Data: Basement elevation _____ ft. If unknown assume 0.00'

First floor elevation _____ ft. Number of stories _____. Height of each story _____ ft.,

Elevation of Curb/Street _____ ft. Overall height of highest water fixture _____ ft.

***NOTE: LBCJMA does not allow any type of fixture to be location in basements**

(Application continued on back)

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9. ANTICIPATED DEMAND (GPM): _____

Will water service be utilized for a heating system?
() Yes () No If no, type of heat _____

10. ESTIMATED WASTEWATER FLOW (GPD): _____

11. SIZE OF SERVICE: _____ In. (minimum size ¾")

Requested Size of Water Meter _____
WATER METER SHALL BE PURCHASED FROM LBCJMA

12. BACKFLOW PREVENTION DEVICE:

Specify type to be installed: _____

13. LENGTH OF WATER SERVICE: curb to building _____ ft. ; curb to meter, or meter pit location _____ ft.

14. WATER SERVICE USAGE:

- IRRIGATION SYSTEM DATA: (If proposed, check one) () Yes () No
If you checked yes, and anticipate utilizing the proposed domestic service as a combined domestic irrigation service, please make certain that the demand stated in #9 of this application reflects the combined demand.
- Will a fire protection system be installed within the property? (check one) () Yes () No
- Fixtures to be served by water service line (Give brief description of manufacturers specifications, where applicable, and number of each unit). *EX: 2 water closets (tank type) 1.6 gals. per flush (Please note if water efficient model)*

1. _____ 2. _____ 3. _____

NOTES:

1. The Owner/Applicant must submit, with this application, four (4) copies of a plan of the proposed facility along with a letter stating the anticipated water and/or sewer usage in gallons per day with calculations.
2. All Restaurants / Commercial food preparation facilities are required to install a minimum of a 1,000 gallon capacity baffled exterior grease interceptor as per the Authority's Pretreatment Resolution. For details please contact Susan Wallover, Pretreatment Coordinator at 215-946-0731 x 206.
3. All Commercial and Industrial Users are required to complete and submit an Industrial Wastewater Discharge Permit Application along with this application.
4. Storm water and/or groundwater sources are **NOT** to be connected to or allowed to leak into the sanitary sewer system at any time under any circumstances. This includes but is not limited to, sump pumps, floor drains, roof drains, yard drains, condensate lines etc.
5. The Owner/Applicant is responsible to obtain a written agreement from any and all neighboring property owner(s) should the Owner/Applicant have the need to go through, or on another person's property in order to make the water and/or sewer connection. The original executed agreement, signed and dated by both parties **MUST** be submitted and on file at the Authority's office **PRIOR** to **ANY** connections being made.
6. The Owner/Applicant is responsible for all costs, fees, permits and Highway Occupancy permits and any required escrow amounts associated with this project.
7. The Owner/Applicant shall obtain a water withdrawal permit if service is required for construction purposes.
8. Permit Fee Schedule is attached.

Subject to the Rules and Regulations of Lower Bucks County Joint Municipal Authority, I hereby apply for a sanitary sewer service connection and/or water connection at the property and location described herein. I hereby certify that the plumbing system connected or to be connected is lead free in accordance with the title regulations of the Safe Drinking Water Act Amendment of 1986, Section 1417, any amendments and all applicable state, local laws, ordinances and plumbing codes.

APPLICANT SIGNATURE _____ **DATE** _____