

# MANTUA TOWNSHIP MUNICIPAL UTILITIES AUTHORITY

397 Main Street  
Mantua, New Jersey 08051  
Phone: (856) 468-1111 Fax: (856) 464-0034

**FORM A:**                    **APPLICATION FOR REPORT ON FEASIBILITY OF PUBLIC SEWER  
AND/OR WATER, RECOMMENDATIONS AND CONDITIONS**

**PURPOSE:**                    To determine the economic and technical feasibility of extending public sewer  
and/or water service to the municipal system.

**FILING FEE:**                    \$50.00 Sewer                    \$50.00 Water  
(Check should be made payable to Mantua Twp. M.U.A.)

**REVIEW FEE:**                    \$500.00 minimum fee for water and \$500.00 minimum fee for Sewer to be  
deposited into Escrow funds for professional review. In the event that the  
costs of review are more than deposited, the applicant shall pay the  
additional cost prior to final approval by the Authority.

**1. APPLICANT:**

Name: \_\_\_\_\_

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

Telephone: \_\_\_\_\_

**2. PROJECT TO BE SERVICED:**

Name: \_\_\_\_\_

Location: \_\_\_\_\_

Area of Entire Tract:  
\_\_\_\_\_

Portion to be Serviced: \_\_\_\_\_

No. of Lots: \_\_\_\_\_ Tax Map: \_\_\_\_\_ Plate: \_\_\_\_\_

Block: \_\_\_\_\_

Type: (Check)      Single Family: \_\_\_\_\_      Townhouses: \_\_\_\_\_

Industrial: \_\_\_\_\_      Commercial: \_\_\_\_\_

Apartments: \_\_\_\_\_      Other: \_\_\_\_\_

**3. ACTION INITIATED WITH PLANNING BOARD:**

Type of Request: (Check)

Subdivision Classification: \_\_\_\_\_

Zoning Change: \_\_\_\_\_ From Zone To: \_\_\_\_\_

**4. DEVELOPMENT PLANS:**

Construction Start Date: \_\_\_\_\_

Applicant Intends to:                      Sell unimproved lots: \_\_\_\_\_

   Sell improved lots: \_\_\_\_\_

   Sell completed units: \_\_\_\_\_

**5. PROFESSIONAL ENGINEER DESIGNING WATER/SEWER SYSTEM:**

Name: \_\_\_\_\_

Company: \_\_\_\_\_

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

\_\_\_\_\_

Telephone: \_\_\_\_\_

**6. DESCRIPTION OF PROPOSED SYSTEMS:**

Water: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Sewer: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**7. SUPPORTING DATA REQUIRED:**

A. General location plan showing streams, streets, blocks, lots and tax map numbers.

Three copies: \_\_\_\_\_

\_\_\_\_\_

B. Proposed system outlines & route of construction: \_\_\_\_\_

\_\_\_\_\_

C. Estimated volumes of flow: \_\_\_\_\_

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

**ACTION:** A letter will be issued by the Mantua Township Municipal Utilities Authority to applicant and Planning Board within 45 days after this application has been received.

**FOR OFFICE USE ONLY:**

Date Application Received: \_\_\_\_\_

Amount of Check:            Application Fee: \_\_\_\_\_    Check #: \_\_\_\_\_

Review Fee: \_\_\_\_\_            Check #: \_\_\_\_\_

\_\_\_\_\_  
Signature of MTMUA

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**ACTION BY THE AUTHORITY:**

1. Subdivision Classification: Letter Issued: Date: \_\_\_\_\_

Feasibility: \_\_\_\_\_

Feasible: \_\_\_\_\_

Not Feasible Letter Issued: Date: \_\_\_\_\_

2. Zoning Change: Letter Issued (Date): \_\_\_\_\_