

## TOWN OF DOVER WATER COMMISSION

100 Princeton Avenue, Dover NJ 07801 Phone: (973) 366-1221 Fax: (973) 366-7599

## **APPLICATION FOR WATER RESERVATION**

	FOR WA	ATER DEPARTMENT USE (	<u> JNLY</u>		
Application No.:		Date Filed:			
Application Fee Received By:		Date:			
Escrow Fee Received By (if applied	:able):				
☐ Approved ☐ Denied		Ву:	Title:		
Resolution No., if applicable		Date:	Signature: _		
PROPERTY LOCATION					
Street Address:					
Municipality:		Block(s):			
Description of Existing Use			- I morting out the control of the c		
Is the property within the Town			☐ Yes ☐ No		
APPLICANT					
Name:					
Address:					
			e Number:		
Email:					
Litton.			/ · · ·	······································	
PROPERTY OWNER					
Name:					
Address:					
			e Number:		
Email:	Fax Number:				
•					
PROJECT/USE BEING SERVED					
Single Family Dwelling	Number of Bed	rooms	Estimated D	aily Usage	
		ber of Bedrooms		Paily Usage	
	Unit #2 – Numb	ber of Bedrooms	·····		
Non-Residential Use (<1,000 GPD)		Estimated Da	ily Usage		
Description of Proposed Use: _		Gro	ss Floor Area:	SF	
		makina aka di Da	the floring		
Other* Description of Proposed Use: _			ily Usage	<b>Ç</b> E	
Description of Proposed Osc.	······································		33 1,007 7 11 021		
		approvals required (atta		approvals)	
☐ Preliminary Site Plan/Subdivision ☐ NJDEP Waterline Extension Permit ☐ Redevelopment Plan ☐ Zoning Permit		Approval Date:			
		Approval Date: Approval Date:			
		Approval Date:			
Other		Approval Date:			
ANTICIPATED CONNECTION DA					
Estimated Date of Service Con	песиоп				
Estimated Date of Water Met	er Installation				
Form Date 10/05/2010			<del>-</del>	Page 1	

## WATER RESERVATION (cont.) CERTIFICATIONS

I certify that the foregoing statements and the materials submitted are true. I further certify that I am the individual applicant or that I am an Officer of the Corporate applicant and that I am authorized to sign the application for the corporation or that I am a general partner of the partnership applicant. I certify that I agree to follow the Rules and Regulations adopted by the Town of Dover Board of Water Commissioners regarding the Construction of Water System Facilities.

(If the applicant is signed by a general	•	d corporate officer. If the applicant is a partnership, this must be
Applicant:		
	(Printed Name)	(Signature of Applicant
application and the the applicant. I ful sign the applicatio must be signed by	at I agree to be bound by this application, the repr rther certify that I am the individual Owner or that i in for the Corporation or that I am a general parti	is application, and that I have authorized the applicant to make this esentations made and the decision in the same manner as if I were I am an Officer of the Corporate Owner and that I am authorized to ner of the partnership Owner.(If the applicant is a corporation this e to follow the Rules and Regulations adopted by the Town of Dover stem Facilities.
(If the applicant is	a partnership, this must be signed by a general partr	ner.)
Owner:		
	(Printed Name)	(Signature of Owner

Form Date 10/05/2010 Page 2