

THE JERSEY CITY MUNICIPAL UTILITIES AUTHORITY

INSPECTION FEES

TEL: (201) 432-1150 ♦ FAX: (201) 432-1576

APPLICANT:	DATE:
CONTACT PERSON:	APPLICANT TELEPHONE NO.
APPLICANT ADDRESS:	
	APPLICANT FAX NO.
APPLICANT E-MAIL ADDRESS:	

PROJECT NAME:	
PROJECT LOCATION:	BLOCK:
	LOT:

PROJECT DESCRIPTION:

INSPECTION FEES:

Estimated Construction Cost \$ _____

Storm, Sanitary or Combined Sewer Construction: 15% of Estimated Construction Cost \$ _____

Linear Feet (L.F.) of sewer pipe to be installed _____

Construction cost estimate shall include the total cost of piping, excavation and backfill, pipe bedding, sewer appurtenances and pump station if required.

TOTAL INSPECTION FEE \$ _____

PAYMENT MUST BE IN THE FORM OF A **BANK CHECK, CERTIFIED CHECK OR MONEY ORDER** MADE PAYABLE TO THE JERSEY CITY MUNICIPAL UTILITIES AUTHORITY.

APPLICANT'S CERTIFICATION:

I CERTIFY THAT THE INFORMATION CONTAINED IN THIS APPLICATION IS COMPLETE AND ACCURATE.

PRINT NAME	SIGNATURE
TITLE	DATE

THE TOTAL FEES OF \$ _____ HAS BEEN RECEIVED FOR THE ABOVE STATED PROJECT.

ON BEHALF OF THE <i>JCMUA</i>	DATE
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