



Township of Old Bridge
 Township Clerk's Office
 One Old Bridge Plaza
 Old Bridge, NJ 08857
 (732)721-5600 Ext 2200

Application to Locate and Construct a Water System

Date of Application _____

Address Where Work Will Take Place

_____ Street Address _____ Town _____
 _____ State _____ Zip _____ Block _____ Lot _____

Contractor Information

Contractor Information
 _____ Company Name _____ Contractor _____ State Permit Number _____ State License Number _____
 _____ Street Address _____ Suite/ PO Box _____ Town _____ State _____ Zip _____
 Contractor E-mail Address _____ Contractor Phone Number _____

Owner Information

Owner Information
 _____ Name of Owner _____
 _____ Street Address _____ Suite/ PO Box _____ Town _____ State _____ Zip _____
 Owner E-mail Address _____ Owner Phone Number _____

The fee for review of each application to locate and construct a water system is One Hundred Fifty Dollars (\$150) per Old Bridge Ordinance 515-10. Checks are to be made out to Old Bridge Health Department.

Acceptance of this fee in no way grants approval for locating or constructing a water system. The undersigned agrees to conform to the provisions of the State regulations known as AStandards for Construction of Public Non-Community and Non-Public Water Systems@ (N.J. Administration Code 7:10-12,1 through 7:10-12.43 inclusive).

Plans must be submitted and any questions directed to Middlesex County Public Health Department, Environmental Division, 711 Jersey Ave., New Brunswick, NJ 08901. They may be reached at 732-745-8480.

Sketch of the property must show the following:

- Size Of Lot
- Location Of All Buildings
- Location Of Proposed Water Supply
- Location Of Sewerage Facilities
- Estimated Depth Of Well
- Method Of Installation
- Type Of Screen To Be Used (Material, Length, Slot Size)
- Type Of Casing And Size To Be Installed
- Method Of Disinfection
- Domestic
- Irrigation
- Type Of Pump Proposed

Signature _____ Print Name _____

Application will not be accepted if it is not signed

Please submit application and fee to Old Bridge Township Clerk's Office. Checks should be made payable to **Old Bridge Township Health**

For Office Use Only:

Application Submitted	Date	Application Scanned and Saved	Date	Initials	Date Sent to Health Dept.	Date
Application to Old Bridge Complete	Date Completed	Fee Paid to Old Bridge	Date	Check #/ Cash	Notes	