

No. _____

TOWNSHIP OF COLTS NECK
-- BOARD OF HEALTH --

FEE: \$100.00

Application For A Permit To Locate, Construct and Alter
an Individual Water Supply and System

DATE _____

LOCATION - ADDRESS _____ or BLOCK No. _____ LOT No. _____
Number Street

OWNER (print) _____

PRESENT ADDRESS _____

NAME & ADDRESS OF CONTRACTOR (print) _____

TYPE OF BUILDING TO BE SERVED _____ USE: YEARLY _____ SUMMER _____

Dwelling Unit - Number of Bedrooms _____ Expansion Attic: YES _____ NO _____

Other - Type of Building _____ Gallons per Person _____

Type of well or source of water supply _____

Estimated depth of well _____ Method of sealing _____

Pumping Equipment _____

Storing Facilities _____

Purification Facilities _____

If this is a replacement well, provide reason for replacement. _____

If this is a replacement well, will old well be decommissioned? Yes ___ NO ___

If NO please explain why? _____

ON OTHER SIDE SKETCH OF THE PROPERTY TO BE SERVED SHOWING THE FOLLOWING:

- A. Size of lot
- B. Area in Square Feet
- C. Location of all Buildings
- D. Location of the proposed individual water supply
- E. Location of sewer facilities

The undersigned agree to construct or alter aforescribed water supply in accordance with the provisions of an ordinance entitled: "AN ORDINANCE establishing a code regulating the location, construction, alteration, use and supervision of individual and semipublic water supplies, requiring certain permits, providing for the inspection of such supplies, the fixing of fees and prescribing penalties for violations" adopted by the Board of Health,

Owner _____

Contractor _____