

WARREN TOWNSHIP SEWERAGE AUTHORITY

46 Mountain Blvd., Warren, New Jersey 07059
(908) 753-8000 * Fax (908) 753- 1507

EMERGENCY CONNECTION APPLICATION

APPLICANT INFORMATION

1. _____
(NAME) (HOME PHONE and FAX NUMBER)
2. _____
(ADDRESS FOR EMERGENCY CONNECTION) (DATE OF APPLICATION)
3. _____
(MAILING ADDRESS) (BLOCK & LOT)

SEPTIC SYSTEM HISTORY

1. _____
(No. of occupants) (No. of bedrooms) (No. of bathrooms)
2. _____
(Other pertinent facts)
3. _____
(Nature of problem - describe - septic/laundry)
4. Describe why you cannot repair system. This could be due to soil, topography, water table, location, size of property, or nearby wells.

5. Number of times septic tank pumped in last three years _____ (submit proof)

DOCUMENTATION

1. Dates and description of problem - attach documentation
2. Prior investigations by Warren Township Board of Health - give dates and by whom and result
3. Proof of Hazard (describe dye test, laboratory test, and any other evidence - submit copy)
4. Attempted corrective action (describe - give name, address, date of contractor attempted repairs - proof)
5. Engineering Evaluation (name, address, telephone number of engineer - attach copy of report that must include details on all repair options. An engineer's written, signed and sealed letter is mandatory)
6. Attach a sketch with lot dimensions, including all structures, parts of subsurface sewage disposal systems, curtain draws, storm drains, sewer system lines, location of attempted repairs with description of same, wells on the property and within 100 feet of property line, dry wells and roof run off lines. Include any special features of importance. The distances between all parts must be indicated.

SEWER CONNECTION ANALYSIS (describe each element)

1. Distance - indicate on sketch
2. Easements
3. Type of connection - gravity - lift pump
4. Single Family Dwelling _____ ? If not, list estimated daily flow
5. Moratorium or the reasons you have not previously connected

6. Other problems - describe

What is the relationship of Applicant to the to property in question? _____

By signing below applicant and owner certify to the accuracy of the information in this application and state that they understand the Authority's Rules and Regulations and agree to be bound thereby.

Signature of Applicant

Date

Signature of Owner
(if different than Applicant)

Date

WARREN TOWNSHIP SEWERAGE AUTHORITY

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Escrow Agreement (Emergency Connection)

The undersigned applicant hereby agrees that if the Escrow Amount submitted with this application is not sufficient to cover professional charges and/or fees, he/she will provide additional funds as deemed necessary by the Authority's Secretary in accordance with the Authority's Rules and Regulations Article 3.13 et. seq. (available for review and purchase in the WTSA office).

In the event it is determined that escrow funds in addition to the initial deposit are required, the Secretary to the Authority shall notify the applicant. The applicant agrees to pay the additional escrow within fourteen (14) days of said notice.

Applicant further agrees and acknowledges that if the aforesaid additional escrow funds are not paid within the time specified, all processing of the applicant's application on this and any other application submitted by the applicant or owner will be terminated until the payment is made in full. In any event, no construction permit or Certificate of Occupancy will be issued by the Construction Code Official of the Township of Warren until such time that the applicant has posted all outstanding balances to cover all escrow charges with the Authority.

In the event amounts deposited in said escrow account shall be in excess of the amount required for review and inspections, the excess funds shall be returned to the applicant after completion of the project and upon the written request of the applicant, pursuant to N.J.S.A. 40:14A-41.

If, however, no request for release is received, the monies shall remain in the escrow account until issuance of a Certificate of Occupancy, at which time the unused monies shall be released.

I, the applicant, as signed below, have carefully read and understand the above Escrow Agreement and hereby agree to abide by the conditions set forth herein. I further understand that should I not abide by these conditions summary collection proceedings may be initiated by the Warren Township Sewerage Authority.

Date

Applicant's Signature

Tax ID # or Social Sec. #**

**Taxpayer's Identification Number must be provided for all escrow deposits in excess of \$5,000.00 according to law.

FEES FOR EMERGENCY APPLICATION:

- Filing Fee (Separate Check)
- Escrow Fee (Separate Check) - see attached schedule

Application filing fee: **Emergency Connection \$100**

As set forth in the Authority's Rules and Regulations Article 3.13 et. seq., an escrow fee must accompany an application in addition to the application filing fee. The escrow fee shall be used to cover costs of professional services incurred in connection with the review of applications, review and preparation of documents and inspection of improvements. The costs incurred may be more or less than the escrow amount. If the escrow account contains insufficient funds to enable the Authority to perform these reviews and inspections, an additional escrow amount will be established by the Authority and must be posted by the applicant within 14 days of the issuance of the notice. The Authority will discontinue any action on this and any other of applicant's applications or inspections and will not issue any permits if the escrow fund is not restored within 14 days of the Authority's request for additional funds. If the total review costs are less, the remainder of the escrow account will be refunded pursuant to N.J.S.A. 40:14A-41.

Escrow fee: **Emergency Connection \$ 1,500**

Request for Taxpayer Identification Number and Certification

Give Form to the
 requester. Do not
 send to the IRS.

Print or type
 See Specific Instructions on page 2.

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.	
2 Business name/disregarded entity name, if different from above	
3 Check appropriate box for federal tax classification; check only one of the following seven boxes: <input type="checkbox"/> Individual/sole proprietor or single-member LLC <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶ _____ Note. For a single-member LLC that is disregarded, do not check LLC; check the appropriate box in the line above for the tax classification of the single-member owner. <input type="checkbox"/> Other (see instructions) ▶ _____	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) _____ Exemption from FATCA reporting code (if any) _____ <small>(Applies to accounts maintained outside the U.S.)</small>
5 Address (number, street, and apt. or suite no.)	Requester's name and address (optional)
6 City, state, and ZIP code	
7 List account number(s) here (optional)	

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Note. If the account is in more than one name, see the instructions for line 1 and the chart on page 4 for guidelines on whose number to enter.

Social security number															
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Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
3. I am a U.S. citizen or other U.S. person (defined below); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions on page 3.

Sign Here

Signature of U.S. person ▶

Date ▶

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.
Future developments. Information about developments affecting Form W-9 (such as legislation enacted after we release it) is at www.irs.gov/fw9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following:

- Form 1099-INT (interest earned or paid)
- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)

- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See *What is backup withholding?* on page 2.

By signing the filled-out form, you:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
2. Certify that you are not subject to backup withholding, or
3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income, and
4. Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See *What is FATCA reporting?* on page 2 for further information.

SCHEDULE A

APPLICATION FEE SCHEDULE

1. Preliminary Application	\$100 per EDU
2. Final Application	\$100 per EDU
3. Connection Permit Application.....	\$100 per EDU
4. Conceptual Plan Application	\$100 per EDU
5. Application for Waiver	\$100
6. Request for Review Water Quality Management Plan Amendment	\$25
7. Emergency Connection Application.....	\$100
8. Single Family Application	\$100
9. Construction in a sanitary sewer easement.....	\$100
10. Change in use/increased flow.....	\$100 per EDU
11. Request for extension of prior approval.....	\$100
12. All other.....	\$100

For non residential applications, the fee shall be based on the number of Equivalent Dwelling Units (“EDUs”), with each EDU being equivalent to 280 gpd of projected flow.

SCHEDULE B

ESCROW FUND SCHEDULE

I. PRELIMINARY APPROVAL FOR SUBDIVISION

1-10 lots or units	\$1,550
11-25 lots or units	1,750
26-50 lots or units	3,000
51-100 lots or units	5,000
101 or more lots or units	7,500

If preliminary approval is granted, an additional escrow amount of \$18.50 per linear foot of the sewer extension will be required prior to commencement of any construction to cover engineering inspection fees, unless a different amount is determined at the time of Preliminary Approval.

II. FINAL APPROVAL FOR RESIDENTIAL SUBDIVISION

1-25 lots or units	\$1,500
26-50 lots or units	1,500
51-100 lots or units	2,500
101 or more lots or units	3,500

III. PRELIMINARY APPROVAL FOR NON-RESIDENTIAL APPLICATIONS

Less than 10,000 square feet	\$1,750
10,001-50,000 square feet	2,750
50,001-100,00 square feet	3,500
100,001 or more square feet	5,000

If preliminary approval is granted, an additional escrow amount of \$18.50 per linear foot of the sewer extension will be required prior to commencement of any construction to cover engineering inspection fees, unless a different amount is determined at the time of Preliminary Approval.

IV. FINAL APPROVAL FOR NON-RESIDENTIAL APPLICATIONS

Less than 10,000 feet	\$1,000
10,001 or more square feet	2,000

V. PRELIMINARY AND FINAL APPROVAL FOR SINGLE DWELLING WHERE NO SEWER EXTENSION IS REQUIRED

Single dwelling review	\$1,500
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An additional escrow amount of \$200 will be required at the time of Preliminary and Final Approval to cover engineering inspection fees where such engineering inspection shall be required.

VI. PRELIMINARY APPROVAL FOR SINGLE FAMILY DWELLING WHERE SEWER EXTENSION IS REQUIRED

Single dwelling review	\$1,500
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VII. FINAL APPROVAL FOR SINGLE FAMILY DWELLING WHERE SEWER EXTENSION IS REQUIRED

Single dwelling requiring sewer extension	\$500
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VIII. CONCEPTUAL PLAN	\$1500
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IX. WAIVER	\$1000
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X. EMERGENCY CONNECTION	\$1,500
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XI. REVIEW OF WATER QUALITY MANAGEMENT PLAN AMENDMENT	\$1,500
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