

Lower Salford Township Authority

Application For Sewer Capacity

Sewer Capacity Application Fee: \$225.00

Property Location: _____

Current Use: _____

Description Of Proposed Use: _____

PROPERTY OWNER / DEVELOPER INFORMATION

Name: _____

Tax Parcel No: _____

Address: _____

Telephone: _____

Current Zoning: _____

Acreage: _____

Name of Development: _____

Developer Address (if different): _____

Contact Person: _____

Telephone: _____

Engineer: _____

Telephone: _____

Attorney: _____

Telephone: _____

MULTI-UNIT PROJECT INFORMATION

Number of Units: _____ or Estimated Water Usage in Gallons Per Day _____
(1 EDU = 260 gpd)

STATUS OF PROJECT

Land Development: _____ Preliminary Approval? YES or NO Final Approval? YES or NO

I understand that this application does not guarantee sewer service from the Lower Salford Township Authority. Before service is provided, the owner of the property and/or Developer must comply with all applicable requirements of the Rules and Regulations of the Lower Salford Township Authority.

Owner Signature: _____ Date: _____

Date Received: _____ By: _____

Date Paid: _____ Amount Paid: _____ Check No: _____

Date Approved by the Authority Board: _____