

APPLICATION FOR WATER SYSTEM CONNECTION/EXTENSION ALLOCATION

LEHIGHTON WATER AUTHORITY  
P.O. BOX 29, LEHIGHTON, PA 18235

PHONE NO: 610-377-1912 FAX NO: 610-377-8630 EMAIL: LWAoffice@lehightonwater.com

DATE: \_\_\_\_\_

- 1. OWNER OF PROPERTY.....
- 2. OWNER'S MAILING ADDRESS.....
- 3. APPLICANT (IF OTHER THAN OWNER).....
- 4. APPLICANT'S MAILING ADDRESS.....
- 5. ADDRESS OF PROPERTY TO BE CONNECTED.....
- 6. PROPERTY SIZE IN ACRES.....
- 7. ATTACH A COPY OF THE CURRENT DEED
- 8. PROPOSED DEVELOPMENT TYPE (RESIDENTIAL/COMMERCIAL/OTHER) \_\_\_\_\_
  - A. IF OTHER THAN RESIDENTIAL, WHAT IS YOUR FIRE DEMAND? \_\_\_\_\_
  - B. TYPE OF STRUCTURE.....
  - C. ESTIMATED WATER USAGE..... GPD
  - D. SITE PLAN ATTACHED (SHOWING EXISTING UTILITIES)... YES \_\_\_\_\_ .....NO \_\_\_\_\_
  - E. TAX ID NUMBER (for escrow).....
  - F. REIMBURSEMENT ESCROW AMOUNT (\$500.00 PLUS \$100.00 PER ACRE)  
\$500.00 PLUS \$100.00 X \_\_\_\_\_ ACRES=\$ \_\_\_\_\_

\* Complete W-9-Provide Name, Address and Tax ID or Social Security Number for escrow account and attach to the check.

The Lehighon Water Authority meets the first Wednesday after the first Monday of each month on the second floor of the Lehighon Borough Municipal Building.

All plans and reimbursement escrow must be received thirty (30) days prior to the meeting date for review at that month's meeting. One set of plans should be sent to the Authority and one set to Gannett Fleming, Inc. Attn: Lori Kappen, P.O. Box 67100, Harrisburg, PA 17106-7100.

All costs and expenses incurred by the Authority for review of this application and any associated plans must be paid by the Applicant in accordance with the provisions of Article XI of the Authority's prevailing Rules and Regulations.

Owner and/or Applicant agrees to comply with all current Rules and Regulations and Resolutions of the Authority.

It is agreed by Owner/Applicant the above estimated water usage (GPD) is only an estimate. Since the Authority's Tapping Fee is preliminarily based on this estimated usage, the Authority reserved the right to review the estimated usage against the actual usage at any time in the future it feels necessary and the Owner/Applicant agrees to pay an additional Tapping Fee based on the actual usage, if required.

The undersigned hereby certifies that the information provided above is accurate and complete. Any material misrepresentation heron shall cause any Tapping Fee Permit issued pursuant hereto to be null and void.

\_\_\_\_\_  
Owner/Applicant's Signature

\_\_\_\_\_  
Telephone Number