

**NORTHWESTERN CHESTER COUNTY MUNICIPAL AUTHORITY**

**APPLICATION FOR SEWER SERVICE EXTENSION AND/OR CONNECTION**

To: Northwestern Chester County Municipal Authority  
187 Dampman Road  
P.O. Box 308  
Honey Brook PA 19344

**THE UNDERSIGNED HEREBY MAKES APPLICATION FOR PERMISSION TO CONSTRUCT A SEWER SERVICE LATERAL AND/OR EXTENSION, AND TO CONNECT THE HEREIN DESIGNATED PROPERTIES WITH THE SANITARY SEWER SYSTEM OF THE NORTHWESTERN CHESTER COUNTY MUNICIPAL AUTHORITY.**

DATE OF APPLICATION: _____	SUBMISSION NO.: _____
NAME OF PROJECT: _____	
PROPERTY LOCATION: _____	
ASSIGNED EQUIVALENT DWELLING UNITS: _____	

NAME OF APPLICANT: _____
MAILING ADDRESS: _____
PHONE NUMBER: _____
E-MAIL ADDRESS: _____

NAME OF OWNER: _____
MAILING ADDRESS: _____
PHONE NUMBER: _____
E-MAIL ADDRESS: _____

NAME OF ENGINEER: _____
MAILING ADDRESS: _____
PHONE NUMBER: _____
E-MAIL ADDRESS: _____

NAME OF LEGAL COUNSEL: _____
MAILING ADDRESS: _____
PHONE NUMBER: _____
E-MAIL ADDRESS: _____

**TO BE COMPLETED BY OWNER OF PROPERTY TO BE SEWERED:**

Provide brief description of proposed development:

---

---

Provide brief description of all new sewer improvements:

---

---

Describe all sewer infrastructure that Applicant intends to offer for dedication to the Authority:

---

---

**ITEMS REQUIRED AS PART OF THIS APPLICATION:**

- ☐ 1. Submit all plans in accordance with the Authority's PROCEDURES AND STANDARDS FOR SUBMISSION TO NORTHWESTERN CHESTER COUNTY MUNICIPAL AUTHORITY FOR SEWER EXTENSIONS - EXHIBIT A.
- ☐ 2. Submit two (2) copies of the plans and one digital copy to the Authority for review.
- ☐ 3. Applicable Review Fee made payable to the Authority.
- ☐ 4. Expected starting date for construction of project: \_\_\_\_\_
- ☐ 5. Expected completion date for construction of project: \_\_\_\_\_
- ☐ 6. Completion date of major stages of project, if any: \_\_\_\_\_

**FOR AUTHORITY USE ONLY:**

RECEIVED BY: \_\_\_\_\_

APPLICATION NAME: \_\_\_\_\_

APPLICATION NO.: \_\_\_\_\_

APPLICATION RECEIPT DATE: \_\_\_\_\_

SUBMISSION NO.: \_\_\_\_\_

REVIEW FEE: \$ \_\_\_\_\_ CHECK NO. \_\_\_\_\_

OTHER FEES: \_\_\_\_\_

PRELIMINARY EVALUATION COMPLETION DATE: \_\_\_\_\_

AUTHORITY MEETING REQUESTED: ☐

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

## SIGNATURE PAGE

By applying for this permit, the undersigned agrees:

To accept and abide by all Resolutions, Rules and Regulations of Northwestern Chester County Municipal Authority and any amendments thereto, and all Ordinances, Resolutions and Rules and Regulations of the Township or Borough, concerning the construction, connection and use of the sanitary sewer system.

To maintain the sewer lateral(s) and appurtenances between the building and the right-of-way at no expense to the Authority and Township or Borough.

To notify the Authority in accordance with the Rules and Regulations when the sanitary sewer lateral and/or extension is ready for inspection and connection to the public sewer.

Submitted by Owner:

Received by NCCMA:

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Title

\_\_\_\_\_  
Title