

APPLICATION FOR SEWER ALLOCATION &/OR CONNECTION PERMIT

<p>*OFFICE USE ONLY* Payment Info</p> <p>Amount: \$ _____</p> <p>Check #: _____</p> <p>Date: _____</p> <p>Rec'd By: _____</p>	<p>BOROUGH OF STROUDSBURG 700 SARAH STREET STROUDSBURG, PA 18360 Phone (570) 421-5444 Fax (570) 421-2690 www.STROUDSBURGBORO.COM</p>	<p style="text-align: center;">SEWER CONNECTION FEES AND EDU FEES CANNOT BE COMBINED WITH BUILDING OR ZONING FEES</p>
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A COMPLETE SET OF PLANS MUST BE SUBMITTED FOR APPROVAL

Owner's Name: _____	Email: _____
Mailing Address: _____	Phone: _____
Name of applicant: _____	Email: _____
Mailing address: _____	Phone: _____
Monroe County Property Tax I.D. # for lot on which sign is located: #1873 _____	
Property (project) address: _____	
Type of Building: _____	
Contractor Name: _____	Email: _____
Mailing address: _____	
Contact person: _____	Phone: _____

NUMBER OF UNITS: (EDU's)	
RESIDENTIAL	
COMMERCIAL	
INDUSTRIAL/INSTITUTIONAL	

SEWER CONNECTION AND / OR PERMIT FEES	
NUMBER OF UNITS: ___ x \$2,700.	\$
CONNECTION PERMIT FEE:	\$250.
TOTAL	\$

SEWER CONNECTION FEES AND EDU FEES CANNOT BE COMBINED WITH BUILDING OR ZONING FEES

The undersigned hereby applies for sanitary sewage connection to the Borough sewer system,
and certifies the foregoing information to be accurate.

Applicant's Signature: _____ Date: _____

APPROVAL	
Code Officer's Signature: _____	Date: _____