

**This application must be complete, signed, and submitted with the current fee to:
Pine Grove JTA, 115 Mifflin Street, Pine Grove, PA 17963**

Current Property Owner(s):

Service Address:

Type of Property: Primary Property
 Rental Property

Connecting to: Gravity Line
 Low-Pressure Sewer System

Number of Units:

Hours & Days Of Operation/Shifts:

Avg. Water Consumption/Day:

No. of Employees:

Avg. No. of Customers/Day:

No. of Seats: (restaurant/tavern):

>>> A Water Meter is REQUIRED to be installed for non-residential properties. Billing is based on consumption <<<

Mailing Address: (if different from above)

City: State: ZIP Code:

Home Phone Number: Mobile Phone Number:

Name & Contact Information of Contractor performing the work:

** The property owner must sign a waiver if contractor is not on the JTA's list -
Attach a sketch showing interior layout of plumbing fixtures, and sketch showing exterior piping to sewer with dimensions*

A PUBLIC SEWAGE PERMIT MUST BE OBTAINED PRIOR TO APPLYING FOR A ZONING PERMIT

- No foundation drains, cellar drains, or sump pumps shall be connected to the sewer line.
- Nor shall any surface or spring water be connected into the sewer line.

This permit is issued in accordance with and subject to all Rates, Rules, and Regulations of the Pine Grove Joint Treatment Authority. Permit-tee agrees to all costs and charges with respect to the repair, replacement, or demolition and agrees to pay all costs and charges for service as set forth in the applicable statutes, which include the right of the Authority, in its discretion, to encumber the permit-tee's property by lien or to terminate sewer/water service to the property in the event of delinquent status.

This permit is in full force upon receipt of the required fees, and upon approved inspection of the installation.

This permit shall expire one year from the date of issuance.

- By signing this application, I acknowledge that I have read the application and the information I furnished on this application is true, complete and accurate to the best of my knowledge.

Signatures(s) of Applicant(s): Date of Application :

Full Name(s) (please print):

AUTHORITY USE ONLY

JTA Account No. _____

Number of EDU's _____ = Tapping Fee \$ _____

Received Application Fee \$ _____

Check # _____ Cash MO# _____

Received Sketch Yes No

Permit No. _____ Issued on _____

BY: _____

AUTHORITY USE ONLY

DATE PAID STAMP / DATE RECEIVED STAMP