



# Sussex County Municipal Utilities Authority

34 South Route 94  
Lafayette, NJ 07848  
973-579-6998 /F: 973-579-7819  
[www.scmua.org](http://www.scmua.org)

## APPLICATION FOR SCMUA APPROVAL/ENDORSEMENT (FORM SCMUA – 1)

This application is necessary for the requisite approval and/or endorsement by the Sussex County Municipal Utilities Authority (SCMUA) of the constructions plans, specifications, and engineering wastewater reports for any and all proposed wastewater collection, conveyance, and/or treatment and disposal facilities within the District of the SCMUA (Attachment #1), in the County of Sussex, State of New Jersey, pursuant to N.J.S.A. 40:14B-61. This application form and supporting documentation shall be filed in **triplicate**, accompanied by the SCMUA Application Checklist (Form SCMUA-2); three (3) copies of signed/sealed project plans, specifications, and technical design reports; and the required SCMUA review fee (as outlined in Attachment #2) pursuant to the applicable SCMUA Rate Schedule in effect.

### 1. PROJECT NAME

Name: \_\_\_\_\_

### 2. APPLICANT/OWNER\*

Name: \_\_\_\_\_ Telephone ( ) \_\_\_\_\_

Permanent Legal Address \_\_\_\_\_

City or Town \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

*\* Application/Owner should be the eventual owner of the proposed Wastewater Facilities.*

### 3. LOCATION OF ACTIVITY

Name of Facility/Site \_\_\_\_\_

Street Address/Location \_\_\_\_\_

Lot No. \_\_\_\_\_ Block No. \_\_\_\_\_

City or Town \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Municipality \_\_\_\_\_ County \_\_\_\_\_

**4. NEW JERSEY LICENSED PROFESSIONAL ENGINEER**

Name \_\_\_\_\_ N.J. License No. \_\_\_\_\_

Name of Firm, if employee \_\_\_\_\_

Mailing Address \_\_\_\_\_

City or Town \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Telephone ( ) \_\_\_\_\_ Fax ( ) \_\_\_\_\_

**5. ESTIMATED CONSTRUCTION COST**

Cost of wastewater facilities proposed in this application \$ \_\_\_\_\_  
(attach a breakdown of the cost of all items related to the construction of the proposed treatment works)

**6. OTHER REQUIRED PERMITS/ENDORSEMENTS**

If any of the following applications are needed for this project, provide the applicable information.

| Permit Type  | Application Status*    |          | Application Date<br>(or Application No.) |
|--|------------------------|----------|--|
|  | Pending<br>(Check One) | Approved |  |
| • NJDEP Treatment Works Approval                           | _____                  | _____    | _____                                    |
| • Water Quality Management Plan<br>Amendment               | _____                  | _____    | _____                                    |
| • Stream Encroachment                                      | _____                  | _____    | _____                                    |
| • Freshwater Wetlands                                      | _____                  | _____    | _____                                    |
| • NJPDES (DWS, DGW, or SIU)                                | _____                  | _____    | _____                                    |
| • Municipal Endorsement<br>(Municipality as per #3, above) | _____                  | _____    | _____                                    |

(\* - If any of the above applications were approved, please provide a copy of the approval with this application)

**7. WASTEWATER ALLOCATION**

Wastewater Flow Allocation Available \_\_\_\_\_  
Yes No N/A

Allocation Gallonage \_\_\_\_\_ Municipality/Entity \_\_\_\_\_

**8. PROJECT DESCRIPTION**

(Brief Description of Proposed Wastewater Facilities; Intended Use; Number of Proposed Units of each type to be served; Average Daily Flow per unit and per project and, if to be served by the Upper Wallkill Treatment Plant, number of EDU's as per SCMUA EDU Schedule (Attachment #3). Use additional sheets if necessary).

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**9. PROPERTY OWNER'S CERTIFICATION**

I hereby certify that I, \_\_\_\_\_  
(Property Owner's Name)

own the property identified in this application. As owner, I grant permission for the activity to be permitted under this application and authorize the SCMUA or their representatives to conduct on-site inspections, if necessary. If the construction activity will take place in an easement, I certify that with this application, I presently have or will obtain permission of the property owner(s) to initiation of construction of the proposed treatment works.

\_\_\_\_\_  
Signature of Owner

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print or Type: Name and Position

**10. STATEMENT OF PREPARER OF PLANS, SPECIFICATIONS, ENGINEER'S REPORT AND APPLICATION**

I hereby certify that this application and associated engineering plans, specifications, and engineer's report applicable to this project comply with the current rules and regulations of the SCMUA and NJDEP with exceptions as noted.

\_\_\_\_\_  
Signature of Engineer

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print or Type: Name and Position

PROFESSIONAL ENGINEERS  
EMBOSSSED SEAL

**11. PROPER CONSTRUCTION AND OPERATION CLAUSE**

I, the Applicant/Owner, \_\_\_\_\_, agree that the proposed wastewater facilities will be properly constructed and operated in accordance with the engineering plans, specifications and conditions under which approval is granted by the SCMUA and NJDEP. I certify that the entity identified herein shall ensure that the wastewater facilities are operated in accordance with NJDEP regulations and the associated NJPDES permit.

|                                       |   |
|---------------------------------------|---|
| _____<br>Signature of Applicant/Owner | _____<br>Entity Name  |
| _____<br>Print or Type: Name          | _____<br>Entity Address   |
| _____<br>Date                         | _____<br>City                      State                      ZipCode |

**12. CERTIFICATION BY APPLICANT/OWNER**

I certify, under penalty of law, that the information provided in this application and the attachments is true, accurate, and complete. I am aware that there are significant civil and criminal penalties for submitting false, inaccurate, or incomplete information, including fines and/or imprisonment.

|   |               |
|---|---------------|
| _____<br>Signature of Applicant           | _____<br>Date |
| _____<br>Print or Type: Name and Position |               |

## FORM SCMUA –1 ATTACHMENT #1

The SCMUA's District currently includes the following municipalities:

- Andover Borough
- Andover Township
- Branchville Borough
- Frankford Township
- Franklin Borough
- Green Township
- Hamburg Township
- Hardyston Township
- Lafayette Township
- Montague Township
- Ogdensburg Township
- Sandyston Township
- Sparta Township
- Stillwater Township
- Sussex Borough
- Vernon Township
- Walpack Township
- Wantage Township

This listing of SCMUA District Municipalities should be referenced to determine the applicability of SCMUA reviews, approvals, and endorsements, as well as “effected party” designations for 208 planning purposes, as per NJS 40:14-61, et seq:

40:14B-61. Consent required for construction of other sewage facility. No sewage disposal plant or other facilities for the collection, treatment or disposal of sewage arising within a district shall be constructed unless the municipal authority shall give its consent thereto and approve the plans and specifications therefore. No facilities for the distribution of water within a district shall be constructed unless the municipal authority shall give its consent thereto and approve the plans and specifications therefore. Each municipal authority is hereby empowered to give any such consent and approval, subject, however, to the terms and provisions of any agreement with the holders of bonds. Upon submission to the authority of a complete application for approval of such a plant or facilities, the authority shall approve or disapprove the application within 90 days of the date of its submission, but the authority may extend the time for period not to exceed 30 days by adoption of a resolution therefore. As used in this section, “complete application” means an application form completed as specified by resolution and the rules and regulation of the authority, and the accompanying documents, plans and specifications required by resolution for approval of the plant or facilities. An application shall be certified as complete, for the purposes of the commencement of the time for action by the authority, immediately upon the meeting of the requirements specified in the resolution and the rules and regulations of the authority. Failure of a municipal authority to approve or disapprove plans and specifications submitted pursuant to this section within such time, shall constitute approval thereof and consent of the authority to construction of the plant or facilities.

**FORM SCMUA –1**  
**ATTACHMENT #2**

**SCMUA Review Fees FY2020**

I. Review Fees

1. Treatment Works Approval Application Review Fees:

- a. Fees for Authority review of Treatment Works Approval Applications (TWA) and/or Endorsement for Approval of Wastewater Treatment, Conveyance and Disposal Facilities shall be as follows:

| <u>Type Facility/Review</u> | <u>Amount of Fee</u>  |
|-----------------------------|---|
| Minimum Fee                 | \$1,500 per TWA/ Endorsement  |
| Subsurface Disposal         | \$1,500 per disposal system   |
| Pipelines                   | \$1,500 per mile or part thereof  |
| Pumping Stations            | \$1,000 per pumping station (less than 8,000 gpd)<br>\$2,500 per pumping station (8,000 gpd or more)  |
| Treatment Plants            | \$5,000 for first 100,000 GPD capacity, plus<br>\$2,500 for each 100,000 GPD thereafter (or<br>portion thereof)   |
| Repeat/Concurrent Review    | Repeat reviews of incomplete or substandard submittals/resubmittals, or work in progress concurrent reviews with endorsing agencies/ municipalities may require the assessment of repeat or additional fees, at the discretion of the Authority based on additional review effort required. |

2. Review Fees for Endorsement of Wastewater Management Plans (WMP) and Amendments, Water Quality Management Plan (WQMP) Amendments, and NJPDES - SIU, DGW, DSW Permits:

- a. An initial minimum application fee in the amount of \$1,500 shall be required for review of the above prior to endorsement by the Authority. The initial minimum \$1,500 application fee shall be applied to the actual cost of review by the Authority's Engineers, Attorney, and Staff. All expenses in excess of \$1,500 shall be billed to the requesting party.

3. SCMUA Staff Reviews/Inspections/Actions:

- a. Any necessary reviews, inspections, and/or actions performed by SCMUA Staff above and beyond the scope of review fees per Sections A.1 and A.2., above, and directly relevant to a specific project, applicant, or escrow account may be billed in accordance with the following rates:

Engineer = \$100/hour

Superintendent = \$75/hour

Environmental Consultant = contracted hourly rate

B. Groundwater Remediation

1. Groundwater remediation discharges into the Upper Wallkill System will be considered on a case by case basis. The applicant shall be required to pay a \$1,500 review fee to the SCMUA. If an Authorization to Discharge Permit is granted, the Hauled Sewage Rate shall apply. Approvals for connection to the local sewage collection system are the responsibility of the applicant.

FORM SCMUA – 2  
APPLICATION CHECKLIST

| YES   | NO    |   |
|-------|-------|---|
| _____ | _____ | 1. Application Checklist (FORM SCMUA-2) signed and dated by Applicant.  |
| _____ | _____ | 2. Original (plus 2 copies) Application FORM SCMUA-1, completed, signed and sealed *(Applications for SCMUA Endorsement complete Sections 1,2,3,4,6,7,8,10 and 12). |
| _____ | _____ | 3. Application Review Fee Enclosed (FORM SCMUA-1, ATTACHMENT #2).   |
| _____ | _____ | 4. Project Plans & Specifications (3 sets), signed and sealed *(for all construction approvals).  |
| _____ | _____ | 5. Project Engineering (Planning/Design) Report (3 copies), signed and sealed.*   |
| _____ | _____ | 6. Project/Site Location Map (3 copies) on USGS Quadrangle Map with project/site clearly delineated.  |
| _____ | _____ | 7. Municipal Endorsement (per FORM SCMUA-1, Section 6).   |

\*NOTE: Application documents to be signed/sealed by a New Jersey Licensed Professional Engineer.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print or Type: Name and Position