Veolia Water New Jersey, inc
1451 Route 37 West, Suite 2
Toms River, New Jersey 08755
Tel:732-349-0227
Email: njtr.nbpreapp@veolia.com

Pre-Application Form

Date: _____

1. **Applicant Name:** _____
   Applicant Address: _____
   Town, State, Zip: _____
   Phone: _____
   E-mail: _____

2. **Project Contact:** (If different from above) _____
   Contact Address: _____
   Town, State, Zip: _____
   Phone: _____
   E-mail: _____

3. **Project Name:** _____
   Project Address: _____
   Town, Zip: _____
   Project Block(s): _____ Lot(s): _____

   Proposed Project Description:

   _____

   _____

4. **Responsible Billing Party:** _____
   Address: _____
   Town, State, Zip: _____
   Phone: _____

Proposed use: Residential ____ Commercial ____

Please provide a description of the **EXISTING** property: _____

Of Residential/Commercial units: _____

Of Bedrooms per unit: _____ # Of Baths: Full_____ Half_____

Total demand for project in gallons per day: _____ Total square footage _____

**Requires signed and sealed letter by a licensed professional engineer with calculations of fixture unit values & daily demand for major subdivisions or commercial sites based on either N.J.A.C. 7:10-12.6 or R.S.I.S. Table 5.1. Site plans must be submitted as part of this package.

Fire Service: ***Water Service Request Purposes Only**

Required: Yes ____ No ____

Additive: Yes ____ No ____

ALL HIGHLIGHTED AREAS MUST BE FILLED OUT COMPLETELY OR THE APPLICATION WILL BE RETURNED.

Fire Service Size: 2"____ 4"____ 6"____ 8"____ 10"____ **(As Applicable)**

Domestic Service Size: 1" ____ 2" ____ 4" ____ 6" ____ 8" ____ 12" ____

Meter Size: ***Must Obtain Company Approval**

5/8"x3/4"____ 3/4"____ 1"____ 1½"____ 2"____ 3"____ 4"____ 6"____ 8"____ 10"____

Meter location: Meter Pit ____ Hot Box ____ Other (specify) _____

Building Set Back Length: Length_____ **(The distance from property line to proposed meter location)**

Existing well on property: Yes ____ No ____

APPLICANT NAME: (PRINT) _____

APPLICANT SIGNATURE: _____

FOR VWNJ PURPOSES ONLY

Service # _____

NB Investigation # _____

Field Investigation # _____

NB Comments: _____