

**LANDIS SEWERAGE AUTHORITY
PROCEDURES AND ALLOCATION MANUAL
1776 South Mill Road, Vineland, New Jersey 08360
(856) 691-0551**

**Subject: Landis Sewerage Authority
Allocation Escrow Account**

The Landis Sewerage Authority will establish an escrow account at Sun National Bank to maintain your escrow deposit. This is an interest-bearing account and you will receive the interest and be responsible for the income tax on it.

Therefore, it is a requirement that W-9 form be completed by you and returned to our office before this money can be deposited to your account.

Kindly return the executed W-9 form as soon as possible. Be sure you identify your project in addition to signing your name.

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XL FORM

C. Telephone: _____

4. ENGINEER DESIGNING PROJECT

A. Name of Firm: _____

B. Contact: _____

C. Address: _____

D. Telephone #: _____

5. PROJECT

A. Name: _____

B. Blk(s) _____ Lot(s) _____

C. Tax Map Sheet(s) _____

D. Street Address: _____

E. Total Acreage: _____

F. Buildable Acreage: _____

6. PROJECT TYPE

OF UNITS

A. Single Family _____

B. Townhouse _____

C. Condominium _____

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D. Apartment _____

E. Other: _____

7. TOTAL NUMBER OF DWELLING UNITS: _____

8. Total Estimate of Capacity Required: _____

(Provide calculations to support estimate based on the Manual of Wastewater Engineering Collection and Pumping of Wastewater, Metcalf & Eddy, Inc. or NJDEP regulations)

9. LIST OF ALL OTHER APPROVALS DATE APPROVED

A. _____

B. _____

C. _____

D. _____

E. _____

G. _____

10. DESIGN CHARACTERISTICS

A. Can connection occur to an adequate existing facility? Y____N____

B. Where will project connect? _____

C. Are on-site sewer improvements necessary? Y____N____

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D. Will the on-site improvements be gravity or force main/pump station or both? G____ F____ B____

E. Are off-site sewer improvements necessary? Y____ N____

F. Will the off-site improvements be gravity or force main/pump station or both? G____ F____ B____

11. ENGINEER'S ESTIMATE OF TOTAL SEWER IMPROVEMENTS INCLUDING PUMP STATION, EASEMENTS AND RIGHT OF WAYS: \$_____

12. OTHER CONSIDERATIONS:

A. Will applicant dedicate to the LSA all off-site improvements? Y____ N____

B. Will applicant provide all necessary easements and right of ways to the LSA? Y____ N____

C. Will applicant post performance and maintenance bonds? Y____ N____

13. LIST PLANS AND OTHER MATERIAL ACCOMPANYING APPLICATION:

A. _____

B. _____

C. _____

D. _____

14. SIGNATURE OF APPLICANT: _____

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XL FORM

DO NOT WRITE BELOW THIS LINE

LSA USE ONLY

DATE RECEIVED _____

FEE COLLECTED _____

ACTION BY LSA: Date: _____ *Approved* _____ *Disapproved* _____

COMMENTS: _____

SIGNATURE OF AUTHORITY REPRESENTATIVE: _____