

*This information to be completed by Municipal Authority Staff:*  
DATE RECEIVED: \_\_\_\_\_ FILE APPLICATION NO. \_\_\_\_\_  
AMOUNT OF ESCROW FUNDS RECEIVED: \_\_\_\_\_

**BERKS-MONTGOMERY MUNICIPAL AUTHORITY**  
**BERKS AND MONTGOMERY COUNTIES, PENNSYLVANIA**  
**APPLICATION FOR REVIEW OF SANITARY SEWER PROJECTS**

**Project Name:** \_\_\_\_\_

Plan Stage (Sketch/Preliminary/Final): \_\_\_\_\_

Phase: \_\_\_\_\_ Last Revised Date: \_\_\_\_\_

**Developer/Owner:** \_\_\_\_\_

Owner's Address: \_\_\_\_\_

Telephone: \_\_\_\_\_

Fax No.: \_\_\_\_\_

E-mail: \_\_\_\_\_

**Authorized Agent Contact:** \_\_\_\_\_

Agent Address: \_\_\_\_\_

Telephone: \_\_\_\_\_

Fax No.: \_\_\_\_\_

E-mail: \_\_\_\_\_

**Engineer, Surveyor, Planner:** \_\_\_\_\_

Engineer Address: \_\_\_\_\_

Telephone: \_\_\_\_\_

Fax No.: \_\_\_\_\_

E-mail: \_\_\_\_\_

**Location of Property:** \_\_\_\_\_

Physical Address: \_\_\_\_\_

Zoning District: \_\_\_\_\_

Tract Acreage: \_\_\_\_\_

List All Lot Numbers: \_\_\_\_\_

County Tax Parcel Number: \_\_\_\_\_

Berks County Deed Book Ref: \_\_\_\_\_

**Description of Project:** The application proposes \_\_\_\_\_

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**Type of Development:** (Check all that apply.)

<u>Number of Units</u>	<u>Type of Development</u>	<u>Basements? (Yes or No)</u>	<u>Rental Units? (Yes or No)</u>
_____	Single-Family Detached	_____	_____
_____	Single-Attached, Townhouses	_____	_____
_____	Semi-Detached, Double House	_____	_____
_____	Multi-Family, Apartments	_____	_____
_____	Planned Residential Development	_____	_____
_____	Commercial	_____	_____
_____	Industrial	_____	_____
_____	Other, Please Specify. _____	_____	_____

**Type of Service Proposed:** (Check as applicable)

- \_\_\_\_\_ Sanitary Sewer Hook-Up to Public System
- \_\_\_\_\_ Individual On-Lot Sewage Disposal Systems
- \_\_\_\_\_ Community On-Lot Sewage Disposal System
- \_\_\_\_\_ Water Hook-Up to Public System
- \_\_\_\_\_ Individual On-Lot Private Water Wells
- \_\_\_\_\_ Community Water System

**Connection Schedule and Requirements:** (Complete)

Approximate date structure(s) will be connected to sewer system: \_\_\_\_\_

If a development, approximate date connections will commence: \_\_\_\_\_

Number of individual sanitary sewer laterals requested: \_\_\_\_\_

Maximum number of units proposed to be connected to a lateral: \_\_\_\_\_

**Additional Information:** (Complete if Applicable)

	<u>Existing/Current</u>	<u>Additional Requested</u>	<u>Total</u>
Gross Floor Area	_____ sq ft.	_____ sq ft.	_____ sq ft.
Parking Spaces	_____ Spaces	_____ Spaces	_____ Spaces
Number of Occupants	_____ Persons	_____ Persons	_____ Persons

Answer the following questions: (Circle Y for Yes, N for No)

- Are you presently hooked up to the Authority's public sanitary sewer system(s)? Y or N
- Will this project generate more than 800 gallons per day of sewage? Y or N
- Is subdivision of the property required? Y or N
- Is extension to the existing sanitary sewer system required to serve this site? Y or N
- Are any easements required? Y or N
- Are any pump stations proposed? Y or N
- Will sewer utilities be offered to the Authority for dedication? Y or N

**Note: If industrial, commercial, institutional, multi-family user, complete Sewage Questionnaire (copy attached)**

**List Contractor(s), including address and phone numbers, preferred by property owner to construct sanitary sewer lateral connections:**

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**Fee Schedule and Escrow Requirements:**

Complete this request form and return to the Berks-Montgomery Municipal Authority. The Authority must be in receipt of escrow money before the project can be submitted to the Authority's Engineer for review. The amount of the escrow shall be determined by the number of parcels of real estate proposed in the plan presented for review as follows:

<u>Number of Lots</u>	<u>Minimum Escrow Amount* (Initial Deposit)</u>
1-4	\$ 750.00
5-15	\$ 2,500.00
16-99	\$ 5,000.00
100-500	\$ 7,500.00
Non-Residential Land Development Plan	\$ 2,000.00

**PLEASE SUBMIT A SEPARATE CHECK FOR THE MONEY IN ESCROW PAYABLE TO: "BERKS-MONTGOMERY MUNICIPAL AUTHORITY"**

**ESCROW SUBMITTED HERewith:**

\$ \_\_\_\_\_ Check No. \_\_\_\_\_

**Taxpayer EIN Number:** \_\_\_\_\_

\*Money in escrow is for reimbursement or payment at the Authority's discretion for any and all engineering or legal or other expenses incurred by the Authority, exclusive of work performed by full-time Authority staff members, in processing the materials submitted for review and/or action. The

Authority shall not withdraw funds from the escrow account for any such fees and expenses unless the Owner fails to pay any such fees and expenses within thirty (30) days of initial demand by the Authority. The Authority shall send to Owner bills for fees and expenses monthly as they accrue. Should Authority be required to reimburse itself or directly pay a third party from the escrow account, all work on the plan by the Authority and its consultants shall stop. Such work shall not resume unless and until the undersigned Owner makes payment in an amount necessary to fully fund the escrow account and to pay to the Authority all fees and expenses not previously paid directly by the Owner net of sums drawn by the Authority from the escrow account. Upon the completion of the work by the Authority and the reimbursement by Owner to Authority or direct payment by Owner for all engineering, legal, and other expenses incurred by the Authority, exclusive of work performed by full-time Authority staff members , the balance of the escrow account shall be refunded to the Owner. Money held in escrow will not be returned until all invoices from the Authority Engineer and Solicitor have been received by the Authority and paid by the Owner. The Solicitor and Engineer's invoices are submitted monthly to the Authority.

**Signatures:**

The undersigned Owner represents that to the best of his or her knowledge and belief, all the above statements are true, correct and complete. The undersigned Owner further represents that except as otherwise specifically noted on the attached sheets, all proposed public improvements and facilities as shown on the plans are to be improved, constructed and completed, or acceptable security shall be posted with the Authority in sufficient amount to cover full estimated cost of construction thereof, prior to sale, transfer or agreement of sale of any subdivided parcel as shown on the plan. The Owner and/or authorized agent, agrees to appear to present the application to the Board of Authority at any public meeting at which the Authority reviews the application.

**FOR INDIVIDUAL(S) AS OWNER:**

_____	_____	_____
Print Owner's Name	Owner's Signature	Date
_____	_____	_____
Print Owner's Name	Owner's Signature	Date

**FOR LIMITED PARTNERSHIP AS OWNER:**

	_____	
	Name of Limited Partnership	
_____	By: _____	_____
Print Limited Partner's Name	Limited Partner's Signature	Date

**FOR GENERAL PARTNERSHIP AS OWNER:**

	_____	
	Name of General Partnership	
_____	_____	_____
Print Partner's Name	Partner's Signature	Date
_____	_____	_____
Print Partner's Name	Partner's Signature	Date
_____	_____	_____
Print Partner's Name	Partner's Signature	Date

**FOR CORPORATION AS OWNER:**

\_\_\_\_\_  
Name of Corporation

Attest: \_\_\_\_\_  
Secretary

By: \_\_\_\_\_  
President

\_\_\_\_\_  
Date

**Plan Submittal Instructions:**

1. To facilitate an accurate and expeditious review of your application, please be as thorough as possible when completing this form.
2. Submit two (2) copies of the plans for review. Plan sheet dimensions shall not exceed 25 x 36 inches. When Engineer informs the Authority that the plans are acceptable, Applicant/Developer must provide the Authority with four (4) sets of the approved final plans.
3. If you submit any additional supplemental Material with this plan, please list below:
  - a) \_\_\_\_\_
  - b) \_\_\_\_\_
  - c) \_\_\_\_\_
  - d) \_\_\_\_\_
4. If this application is for a non-residential use (ie. Commercial, Industrial, etc.), please make sure you complete and submit a Sewage Questionnaire Form to the Authority for the proposed use.
5. All correspondence, plan submissions, and requests from developers or Authorized agents must be delivered to the Berks-Montgomery Municipal Authority, 136 Municipal Drive, Gilbertsville, PA 19525.
6. The Authority must be in possession of this completed application form and the cash escrows before plans are released to its Engineer for review.
7. No sewer plan or other document(s) shall be submitted by any person to the Authority's Board for comment, discussion, review, or approval at the Authority's regularly scheduled monthly meeting, unless the plan/document or its most recent revision has been submitted to the Authority at least fifteen (15) calendar days prior to the meeting.
8. If required, the Authority must be in receipt of the PA DEP Planning Module approval letter prior to the approval of the Final Plans.
9. Construction cannot begin on the proposed sanitary sewer facilities until the Authority, Township, Pennsylvania Department of Environmental Protection (DEP), the Berks and/or Montgomery County Conservation District, Pennsylvania Department of Transportation (PennDOT), and any other applicable review agency issue permits as applicable to the proposed project.