

Lower Township MUA

2900 Bayshore Road • Villas, New Jersey 08251
Telephone (609) 886-7146 • Fax (609) 886-4487
www.LTMUA.org



WATER SERVICE PERMITTING REQUIREMENTS

WELL CROSS CONNECTION CERTIFICATION FORM

(SEPERATION OF WATER SERVICE FROM EXISTING WELL)

Property Owner: _____

Address: _____

Block: _____ Lot: _____

Plumbing Contractor: _____

I, the undersigned, certify that I am authorized to sign for the Property Owner for the following items:

1. The existing water service line from the existing well to the residential / business unit has been cut and capped.
2. The existing well servicing the property will ***not*** create a cross connection with the new potable water service line.

3. The existing well is to be sealed. YES _____ NO _____

If NO, the well will be used only for irrigation purposes.

If NO, will the well service any existing hose bibs? If YES, how many? _____

Contractor's Signature: _____ Date: _____
(Print Name)

Owner's Signature: _____ Date: _____