

Gloucester County Utilities Authority

Application For G.C.U.A. Approval To
Operate Sanitary Sewers

Policy, Procedures, and Instructions

No sanitary sewer system, or portion thereof, may be placed into operation without the prior approval of the G.C.U.A.

Pursuant to NJDEP rules and regulations, within 30 days after the construction of the treatment works has been completed, the TWA permittee must submit two (2) executed copies of NJDEP Form WQM-005, "Certificate For Approval By Professional Engineer" to the G.C.U.A. for approval prior to operation. (In the case of partially completed projects, partial operation approval is required.)

The permittee must also submit a fully executed copy of G.C.U.A. Application Form OP-5, "Application For G.C.U.A. Approval To Operate Sanitary Sewers". Upon approval by the G.C.U.A., one executed copy of Form WQM-005 and copies of the appropriate G.C.U.A. resolutions approving Allocation(s) of Capacity for the project will be forwarded to the NJDEP for their records.

GLOUCESTER COUNTY UTILITIES AUTHORITY

APPLICATION FOR G.C.U.A APPROVAL TO
OPERATE SANITARY SEWERS

PART ONE: PROJECT INFORMATION (please print or type)

Name of Project: _____

NJDEP Permit No. _____

Permit Issue Date: _____

NJDEP Permit Flow: _____

Total number of units in project: _____

OPERATING FLOW REQUESTED: _____ **GPD** **NO. OF UNITS:** _____

Has this project received any previous Partial Operating Approvals? Yes _____ No _____

If Yes, please list these approvals below:

	GPD Approved	Date Approved		GPD Approved	Date Approved		GPD Approved	Date Approved
<u>1</u>			<u>6</u>			<u>11</u>		
<u>2</u>			<u>7</u>			<u>12</u>		
<u>3</u>			<u>8</u>			<u>13</u>		
<u>4</u>			<u>9</u>			<u>14</u>		
<u>5</u>			<u>10</u>			<u>15</u>		

PART TWO: ATTACHMENTS (Failure to submit these documents will be cause for rejection of this application.)

Attach two (2) original copies of NJDEP Form WQM-005, "Certification For Approval By Professional Engineer", signed and sealed by the certifying engineer.

PART THREE: SIGNATURE AND SEAL OF LOCAL MUNICIPALITY/MUA

Name Typed: _____ Signature: _____

Title: _____ Date Signed: _____

(Affix Municipal Seal Here)