

**TOWNSHIP OF MANALAPAN  
BOARD OF HEALTH**

Application for A Permit to Locate, Construct and Alter  
A Non-Public or Public Non-Community Water System

Fee: \$100.00  
State Permit # \_\_\_\_\_  
Local Permit # \_\_\_\_\_  
Date of Local Permit \_\_\_\_\_

Location – Address \_\_\_\_\_ or Block # \_\_\_\_\_ Lot # \_\_\_\_\_

Owner \_\_\_\_\_

Present Address \_\_\_\_\_

Name & Address of Contractor \_\_\_\_\_  
\_\_\_\_\_

Type of Building to be Served \_\_\_\_\_ Use: Yearly \_\_\_\_\_ Summer \_\_\_\_\_

Dwelling Unit- Number of Bedrooms \_\_\_\_\_ Expansion Attic: yes \_\_\_ no \_\_\_

Mother/Daughter: yes \_\_\_ no \_\_\_

Other - Type of Building \_\_\_\_\_ Gallons per Person \_\_\_\_\_

**WELL INFORMATION** – Note\*

\* Pitless Adapters are required in Manalapan

Type of Well or Source of Water Supply \_\_\_\_\_

Residential Potable New Well \_\_\_\_\_

Residential Potable Replacement Well \_\_\_\_\_

Public Noncommunity Potable Well \_\_\_\_\_

Public Noncommunity Potable Replacement Well \_\_\_\_\_

Other \_\_\_\_\_ Describe \_\_\_\_\_

Other \_\_\_\_\_ Describe \_\_\_\_\_

Estimated Depth of Well \_\_\_\_\_ Method of Sealing \_\_\_\_\_

Pumping Equipment \_\_\_\_\_

Storing Facilities \_\_\_\_\_

Purification Facilities \_\_\_\_\_

**Replacement Wells – Existing Well Status**

Unknown \_\_\_\_\_ Irrigation \_\_\_\_\_

To be Abandoned \_\_\_\_\_

Date \_\_\_\_\_

\_\_\_\_\_  
Name of Certified Well Sealer

ON OTHER SIDE OR ATTACHED, SKETCH THE PROPERTY TO BE SERVED SHOWING THE FOLLOWING:

- A. Size of Lot
- B. Area in Square Feet
- C. Location of all Buildings
- D. Location of the Proposed Individual Water Supply
- E. Location of Sewer Facilities

The undersigned agree to construct or alter aforescribed water supply in accordance with the provisions of the Standards for Construction of Public Non-Community and Non-Public Water Systems, NJAC 7:10-12.1 et seq.

Owner \_\_\_\_\_

Contractor \_\_\_\_\_