



**TOWN OF CLINTON**  
 INCORPORATED APRIL 5, 1865  
 43 Leigh St., P.O. Box 5194  
 Clinton, N.J. 08809-5194  
 (908) 735-8616 FAX (908) 735-8082

**TOWN OF CLINTON WATER DEPARTMENT  
 APPLICATION FOR WATER RESERVATION**

**FOR WATER DEPARTMENT USE ONLY**

Application No.: \_\_\_\_\_ Date Filed: \_\_\_\_\_

Application Fee: \_\_\_\_\_ Small Project (\$250) Received By: \_\_\_\_\_

\_\_\_\_\_ Large Project (\$1,500)  Initial Application (Year 1)

Extension Fee.: \_\_\_\_\_ Small Project (\$250)  Extension #1 (Year 2)

\_\_\_\_\_ Large Project (\$1,500)  Extension #2 (Year 3)

Approved  Denied By: \_\_\_\_\_ Title: \_\_\_\_\_

Resolution Number (If Applicable): \_\_\_\_\_ Date: \_\_\_\_\_ Signature: \_\_\_\_\_

**TO BE COMPLETED BY APPLICANT**

**PROPERTY LOCATION**

Street Address: \_\_\_\_\_

Municipality: \_\_\_\_\_ Block: \_\_\_\_\_ Lot: \_\_\_\_\_

Description of Existing Use: \_\_\_\_\_

Description of Proposed Use: \_\_\_\_\_

Is the property within the Town of Clinton Water Department Service Area? Yes  No

**APPLICANT**

Name: \_\_\_\_\_

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

Telephone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

**PROPERTY OWNER**

Name: \_\_\_\_\_

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

Telephone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

**PROJECT/USE TO BE SERVED**

- Single Family Dwelling*      *Number of Bedrooms:* \_\_\_\_\_ *Estimated Daily Usage:* \_\_\_\_\_ (See Page 3)
- Multi Family Dwelling*      *Estimated Daily Usage:* \_\_\_\_\_ (See Page 3)
- Non-Residential Use (<1,000 GPD)*      *Estimated Daily Usage:* \_\_\_\_\_ (See Page 4)
- Description of Proposed Use:* \_\_\_\_\_ *Gross Floor Area:* \_\_\_\_\_ SF
- OTHER\***      *Estimated Daily Usage:* \_\_\_\_\_ (See Pages 3 & 4)
- Description of Proposed Use:* \_\_\_\_\_ *Gross Floor Area:* \_\_\_\_\_ SF
- SMALL PROJECT** (DEMAND <1,000 GPD)       **LARGE PROJECT** (DEMAND > 1,000 GPD; NJDEP BWSE PA05E REQUIRED)

**\*For "OTHER" category projects, include approvals required (attach a copy of applicable approvals)**

- Preliminary Site Plan/Subdivision*      *Approval Date:* \_\_\_\_\_
- NJDEP Waterline Extension Permit*      *Approval Date:* \_\_\_\_\_
- Redevelopment Plan*      *Approval Date:* \_\_\_\_\_
- Zoning Permit*      *Approval Date:* \_\_\_\_\_
- Variance Approval*      *Approval Date:* \_\_\_\_\_
- General Development Plan*      *Approval Date:* \_\_\_\_\_
- Council on Affordable Housing*      *Approval Date:* \_\_\_\_\_
- Other*      *Approval Date:* \_\_\_\_\_

**ANTICIPATED CONNECTION DATE**

*Estimated Date of Service Connection:* \_\_\_\_\_

*Estimated Date of Water Meter Installation:* \_\_\_\_\_

**WATER RESERVATION CERTIFICATIONS**

*I certify that the foregoing statements and the materials submitted are true. I further certify that I am the individual applicant or that I am an Officer of the Corporate applicant and that I am authorized to sign the application for the corporation or that I am a general partner of the partnership applicant. I certify that I agree to follow the Rules and Regulations as may be promulgated by the Town of Clinton and the Town of Clinton Water Department regarding the Construction of Water System Facilities.*

(If the applicant is a corporation this must be signed by an authorized corporate officer. If the applicant is a partnership, this must be signed by a general partner.)

**Applicant:** \_\_\_\_\_ (Printed Name)      \_\_\_\_\_ (Signature of Applicant)

*I certify that I am the Owner of the property which is the subject of this application, and that I have authorized the applicant to make this application and that I agree to be bound by this application, the representations made and the decision in the same manner as if I were the applicant. I further certify that I am the individual Owner or that I am an Officer of the Corporate Owner and that I am authorized to sign the application for the Corporation or that I am a general partner of the partnership Owner. (If the applicant is a corporation this must be signed by an authorized corporate officer. I certify that I agree to follow the Rules and Regulations as may be promulgated by the Town of Clinton and the Town of Clinton Water Department regarding the Construction of Water System Facilities.*

(If the applicant is a partnership, this must be signed by a general partner.)

**Owner:** \_\_\_\_\_ (Printed Name)      \_\_\_\_\_ (Signature of Applicant)

<b>RESIDENTIAL WATER DEMAND BY HOUSE TYPE AND SIZE</b>		
<b>TYPE / SIZE HOUSING</b>		<b>WATER DEMAND / GALLONS PER DAY</b>
Single-family detached		
	2 Bedroom	150
	3 Bedroom	225
	4 Bedroom	395
	5 Bedroom	475
Townhouse		
	1 Bedroom	120
	2 Bedroom	140
	3 Bedroom	200
	4 Bedroom	255
Low and mid-rise (up to nine stories)		
	1 Bedroom	95
	2 Bedroom	140
	3 Bedroom	215
High-rise (10 or more stories)		
	Studio	65
	1 Bedroom	80
	2 Bedroom	130
Mobile home		
	1 Bedroom	120
	2 Bedroom	140
	3 Bedroom	245
Source: "Water Needs Through 2040 for New Jersey Public Community Water Supply Systems," by Daniel Van Abs, Jiayil Ding, and Eric Pierson, Rutgers University, 2018. Study commissioned by the New Jersey Department of Environmental Protection.		

<b>NON-RESIDENTIAL AVERAGE DAILY WATER DEMAND</b>	
<b>TYPE OF ESTABLISHMENT</b>	<b>GALLONS PER PERSON</b>
Rooming House	50
Boarding House*	75
a For each nonresident boarder	15
Hotel*	50-75
Motel or tourist Cabin	50-75
Restaurant**	
a Sanitary Demand	5
b Kitchen Demand	5
c Kitchen and Sanitary Demand	10
Camp***	
a Barracks Type	50
b Cottage Type	40
c Day Camp (no meals served)	15
Day School	
a No cafeteria or showers	10
b With cafeteria and no showers	15
c With cafeteria and showers	20
d With cafeteria, showers and laboratories	25
Boarding School*	100
Health care institution other than hospital	75-125
Hospital (depending on type)	150-250
Industrial facility (8 hour shift)	25
Picnic grounds or comfort station	
a With toilet only	10
b With toilet and showers	15
Swimming pool or bathhouse	10
Club House*	
a For each resident member	60
b For each nonresident member	25
Nursing Home	150
Campground	
a Without individual sewer hook-up	75 per site
b With individual sewer hook-up	100 per site
c With laundry facility and individual sewer hook up	150 per site
Store, office building	0.125 gal/sq. ft
Self-service Laundry	50 gal/wash

\*Includes kitchen demand at 10 gallons per person per day. If laundry demand is anticipated, the estimated water demand shall be increased by 50 percent.

\*\*Demand projections shall be calculated by multiplying the certified seating capacity of the establishment by the applicable water usage in gallons per person under 9a, b, or c above, and by a factor of 1, 2, or 3 reflecting the hours of operation, as follows: one to six hours(1), seven to 12 hours(2), or more than 12 hours(3).

\*\*\*When the establishment will serve more than one use, the multiple use shall be considered in determining water demand.

Based on NJAC 7:10-12.6 WATER VOLUME REQUIREMENTS

Amended by R.2004 d. 442, effective December 6, 2004