



BOROUGH OF MIFFLINBURG APPLICATION REQUEST FOR SEWER EDU CONNECTIONS

Name of Applicant: _____

Address: _____
Street Address City State Zip Code

Contact Number: _____

Property Address of Request: _____

Tax Parcel Number: _____

Potential Use: _____

Number of EDUs Requested: _____

Please be sure to answer all of the questions below:

- Yes___ No___ Is EDU for redevelopment of an existing property or building?
- Yes___ No___ Is EDU request for new construction?
- Yes___ No___ Is there an active building permit on file at the CK COG for this project (request)?
- Yes___ No___ Will the project (request) be connected within 45 days of issuance of permit?
- Yes___ No___ Will the project (request) be connected within 120 days of issuance of permit?
- Yes___ No___ Will the project (request) be connected within 180 days of issuance of permit?
- Yes___ No___ Is the request located within the Borough's corporate boundaries?
- Yes___ No___ Is the request located within the existing service area? (Within Limestone & West Buffalo Twp service areas, not within Borough limits)?
- Yes___ No___ Is the request located outside of the existing service area?
- Yes___ No___ Is this request being resubmitted because it did not receive an EDU connection during a previously advertised round of distributions?

Please provide any other information relevant to this request that should be considered for this application:

Signature

Date