

**BOROUGH OF CONSHOHOCKEN AUTHORITY**

**APPENDIX 3**

**SEWER CONNECTION FORMS**

**BOROUGH OF CONSHOHOCKEN AUTHORITY  
FOR SEWER CONNECTIONS THE FOLLOWING FORMS  
SHALL BE UTILIZED**

Connection Type	Required Form to be Submitted					
	A	MIPP-PQ	C-R	C-NR	P	SF/P
<b>Individual Single Family (SF) Dwelling Unit Into An Existing Sewer Main</b>						<b>X</b>
<b>Individual Single Family Dwelling Requiring a Sewer Main Extension; and Multiply Family Dwellings, Townhouses, Condominiums and/or Apartments</b>	<b>X</b>	<b>X</b> For non-residential projects	<b>X</b>	<b>X</b>	<b>X</b>	

Abbreviated Description of Form Use:

A: Feasibility and Planning Module Submittal

MIPP-PQ: Municipal Industrial Pretreatment Program-Preliminary Questionnaire

C-R & C-NR: Design/Permitting for Residential(R) (Borough of Conshohocken Connection Only) and Non Residential (NR) Connections

SF: Individual Single Family (SF) Dwelling Unit to Existing System: New and Replacement (Borough of Conshohocken Connection Only)

P: Application for Issuance of BCA Operating Permit

Submittal Scheduling:

Each application shall be submitted with the designated fee to the Authority not less than 15 days prior to the Authority meeting at which action on the application is desired. Meetings are typically the fourth Tuesday of each month.

**THE BOROUGH OF CONSHOHOCKEN AUTHORITY**

601 East Elm Street, Conshohocken, PA 19428-1914

Phone: (610)828-0979 Fax: (610)828-7720

**FORM A: APPLICATION FOR FEASIBILITY OF PUBLIC SEWER/NON-RESIDENTIAL WASTEWATER DISCHARGE AND PLANNING MODULE ENDORSEMENT**

**PURPOSE:** To prove the technical feasibility of extending/modifying sewer service; request planning module endorsement; and/or request approval to discharge non-residential wastewater

**NON-REFUNDABLE FILING FEES:** Below 5 equivalent dwelling units: \$100.00  
5 equivalent dwelling units and above: \$200.00

**TAPPING FEES:** Prior to plan approval all tapping fees must be paid by applicant.  
As of 08/16 the tapping fee is \$5,600.00 per EDU.

**PROFESSIONAL REVIEW FEES:** Minimum fee to be deposited into an Authority escrow fund:  
Residential Discharge: \$8,000.00 plus \$50.00/EDU  
Non-Residential Discharge: \$10,000.00 plus \$50.00/EDU

**NOTE: W-9 Form is required when submitting check for escrow**

1. **APPLICANT:** Name: \_\_\_\_\_

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

Telephone: \_\_\_\_\_

**DEVELOPER:** Name: \_\_\_\_\_

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

Telephone: \_\_\_\_\_

2. **PROJECT TO BE SERVICED:**

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

Location: \_\_\_\_\_

Area of Entire Tract: \_\_\_\_\_ Portion to be Serviced: \_\_\_\_\_

No. of Lots: \_\_\_\_\_ Block: \_\_\_\_\_ Lots: \_\_\_\_\_

Type: Single Family: \_\_\_\_\_ Townhouses/Duplex: \_\_\_\_\_

Commercial: \_\_\_\_\_ Apartments: \_\_\_\_\_ Other: \_\_\_\_\_

3. **ACTIONS INITIATED WITH PLANNING COMMISSIONS:**

Type of Request:

Subdivision Classification:

Zoning Change: \_\_\_\_\_ From Zone \_\_\_\_\_ to \_\_\_\_\_

4. **DEVELOPMENT PLANS:**

Construction Start Date: \_\_\_\_\_ Duration of Project:

5. **PROFESSIONAL ENGINEER DESIGNING SEWER SYSTEM:**

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

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

Telephone: \_\_\_\_\_

6. **DESCRIPTION OF PROPOSED SYSTEMS (if available) to be dedicated to the Authority:**

Sewer: \_\_\_\_\_

7. **SUPPORTING DATA REQUIRED:**

A. Three (3) copies of general location plan or preliminary construction plans showing streams, streets, tax map numbers, location of existing sewer mains in the area, proposed system outline; manhole rim and invert elevation information; sewer main diameter, material and slope; and contour data.

B. Estimated volume of flow/ EDU's and method of calculation: \_\_\_\_\_

- C. Non-Residential Application:  
Submit completed Form MIPP-PQ
  
- D. Non-Residential Wastewater: Two copies of all available test data.

By affixing my signature hereto, I certify that I am authorized to make the representations contained herein

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Signature of Applicant

Date

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**DO NOT WRITE BELOW LINE**

**BCA USE ONLY**

Date application received: \_\_\_\_\_

Amount of check \_\_\_\_\_

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Signature of BCA

**THE BOROUGH OF CONSHOHOCKEN AUTHORITY**  
601 East Elm Street, Conshohocken, PA 19428-1914  
Phone: (610)828-0979 Fax: (610)828-7720

**FORM C-NR: APPLICATION FOR DESIGN/PERMITTING APPROVAL OF  
PLANS/SPECIFICATIONS FOR PUBLIC SEWER FROM NON RESIDENTIAL  
SOURCES OR A COMBINATION OF A NON RESIDENTIAL/RESIDENTIAL,  
COMMERCIAL AND/OR INDUSTRIAL SOURCES**

**PURPOSE:** This application and supporting data specify the engineering details of the proposed project which will be analyzed for compliance with the Authority engineering standards. For applicants deemed to be significant industrial users the final condition of approval will be a discharge agreement between the Applicant and the Authority regarding the terms and conditions for providing sampling, testing and pretreatment.

**NON-REFUNDABLE FILING FEES:** Below 5 equivalent dwelling units: \$100.00  
5 equivalent dwelling units and above: \$200.00

**PROFESSIONAL REVIEW FEES:** Amount to be determined by the Authority in the event insufficient escrow balance to complete the work exists. However, at time of application a minimum balance of \$10,000.00 shall exist.

If the balance falls below \$2,000.00, the applicant shall replenish in an amount to be determined by the Authority in its sole discretion.

**NOTE: W-9 Form is required when submitting check for escrow**

1. **APPLICANT:** Name: \_\_\_\_\_

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

Telephone: \_\_\_\_\_

**DEVELOPER:** Name: \_\_\_\_\_

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

Telephone: \_\_\_\_\_

2. **PROJECT:** Name: \_\_\_\_\_

Location: \_\_\_\_\_

**3. Outside Approvals:**

County Planning Commission Approval Date: \_\_\_\_\_

Status of Approval: \_\_\_\_\_

Borough Planning Commission Approval Date: \_\_\_\_\_

Status of Approval: \_\_\_\_\_

PADEP Approval Date, if applicable (identify permit type):

\_\_\_\_\_

PENNDOT Approval Date for State Highway Modifications:

\_\_\_\_\_

4. **INITIAL SUPPORT DATA REQUIRED:** 3 copies of the following: plans and specifications encompassing the data required by the BCA Rules and Regulations, itemized sewerage facilities cost estimate, and Engineer's report as outlined in Section 6 of the Rules and Regulations. Additional copies will be requested during review process.
5. Estimated construction time required to finish project once authorization to construct is given: \_\_\_\_\_
6. For Applicants Discharging Non-Domestic Wastes: Name and address of individuals responsible to complete municipal industrial pretreatment questionnaire (to be forwarded by the BCA).

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

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

Telephone: \_\_\_\_\_

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**DO NOT WRITE BELOW LINE**

**BCA USE ONLY**

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Date Application Received: \_\_\_\_\_

Amount of Checks: \_\_\_\_\_

BCA Signature: \_\_\_\_\_

**THE BOROUGH OF CONSHOHOCKEN AUTHORITY**  
601 East Elm Street, Conshohocken, PA 19428-1914  
Phone: (610)828-0979 Fax: (610)828-7720

**FORM C-R: APPLICATION FOR DESIGN/PERMITTING APPROVAL OF  
PLANS/SPECIFICATIONS FOR PUBLIC SEWER FROM RESIDENTIAL  
WASTEWATER SOURCES: MULTIPLE SINGLE FAMILY  
DWELLINGS/TOWNHOUSES/CONDOMINIUMS  
COOPERATIVES AND/OR APARTMENTS**

**PURPOSE:** This application and supporting data specify the engineering details of the proposed project which will be analyzed for compliance with the Authority engineering standards.

**NON-REFUNDABLE FILING FEES:** Below 5 equivalent dwelling units: \$100.00  
5 equivalent dwelling units and above: \$200.00

**PROFESSIONAL REVIEW FEES:** Amount to be determined by the Authority in the event insufficient escrow balance to complete the work exists. However, at the time of application, a minimum balance of \$10,000.00 shall exist.

If the balance falls below \$2,000.00, the applicant shall replenish in an amount to be determined by the Authority in its sole discretion.

In the event that the costs of review shall be more than deposited, the Applicant shall pay the additional cost prior to final approval by the Authority.

**NOTE: W-9 Form is required when submitting check for escrow**

**1. APPLICANT:** Name: \_\_\_\_\_

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

Telephone: \_\_\_\_\_

**DEVELOPER:** Name: \_\_\_\_\_

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

Telephone: \_\_\_\_\_

**2. PROJECT:** Name: \_\_\_\_\_

Location: \_\_\_\_\_



3. **Outside Approvals:**

County Planning Commission Approval Date: \_\_\_\_\_

Borough Planning Commission Approval Date: \_\_\_\_\_

PADEP Approval Date, if applicable (identify permit type):  
\_\_\_\_\_

PENNDOT Approval Date for State Highway Modifications:  
\_\_\_\_\_

4. **INITIAL SUPPORT DATA REQUIRED:** 3 copies of the following: plans and specifications encompassing the data required by the BCA Rules and Regulations, itemized sewerage facilities cost estimate, and Engineer's report as outlined in Section 6 of the Rules and Regulations. Additional copies may be requested during review process.
5. Estimated construction time required to finish project once authorization to construct is given: \_\_\_\_\_

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**DO NOT WRITE BELOW LINE**

**BCA USE ONLY**

Date Application Received: \_\_\_\_\_

Amount of Checks: \_\_\_\_\_

BCA Signature: \_\_\_\_\_

**THE BOROUGH OF CONSHOHOCKEN AUTHORITY**

601 East Elm Street, Conshohocken, PA 19428-1914

Phone: (610)828-0979 Fax: (610)828-7720

**FORM SF: APPLICATION FOR CONNECTION OF INDIVIDUAL SINGLE FAMILY DWELLING UNIT INTO AN EXISTING SEWER MAIN**

**PURPOSE:** To request connection to the Authority system and to verify that the systems will be constructed in compliance with the BCA Rules, Regulations and practices.

**FEES:** Tapping Fee: Fee in existence at time of administratively acceptable permit application.  
As of 08/16 the fee is \$5,600.00 per equivalent domestic unit (EDU).

Non Refundable Administrative Fee: Two units and less is \$50.00.  
Above two units is \$100.00.

Minimum Professional Review Fee: \$5,000.00 plus \$100.00/EDU (Escrowed by BCA)

**NOTE: W-9 Form is required when submitting check for escrow**

**APPLICANT:** Name: \_\_\_\_\_

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

Telephone: \_\_\_\_\_

**SERVICE LOCATION:** \_\_\_\_\_

Tax Map: Block: \_\_\_\_\_ Lot: \_\_\_\_\_

Type: Single Family Unattached: \_\_\_\_\_

Duplex: \_\_\_\_\_ Townhouse: \_\_\_\_\_

Other: \_\_\_\_\_

**REGISTERED PLUMBER INSTALLING LATERAL:**

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

**SUPPORTING DATA REQUIRED:**

- Two sets of plans showing the proposed line from the dwelling to the BCA main. Plans must include both a plan showing the proposed connection point in relation to the lot and elevation section showing lateral profile. Any drawings not containing a profile will not be reviewed.

- Vendor catalog information on saddle. All saddle connections shall conform to design specifications attached hereto.

**BCA Video Taping of Sewer Main System:**

The BCA will perform a video inspection of the sewer main section that is being connected to both prior to design approval and subsequent to the sewer main connection being installed. The cost for this work shall be paid by the Applicant from the escrow fees at rates established by the BCA. Applicant shall allocate sufficient lead time for this work to be performed.

**Permit Issuance Process:**

For all applications the applicant shall provide a PADEP planning module exemption form completely filled out to the BCA. Upon payment of the tapping fee and capacity assurance being provided the BCA shall provide an endorsement letter to the Borough requesting the appropriate Borough representative endorse the exemption application. The endorsement is considered at the Borough's council meeting. The applicant is responsible to submit the Borough endorsed exemption to the PADEP.

The project is not approved for construction until planning module exemption approval is obtained from the PADEP and the BCA provides construction drawing design approval.

**Construction & Inspection:**

The Applicant shall provide a performance bond to the BCA at an amount designated by the BCA for possible damage to the BCA sewer main during construction.

A BCA representative shall be present at the time that the BCA system is being connected into (Monday-Friday only) and arrangements must be made prior to such connection by the Applicant to have personnel present. The applicant will also be responsible for submitting PDFs of as-builts.

The BCA requires a minimum of 72 hours advance notice of any required inspection, including but not limited to, construction or sewer main video work.

By affixing my signature hereto, I certify that I am authorized to make the representations contained herein

Date \_\_\_\_\_

\_\_\_\_\_  
Signature of Applicant

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**DO NOT WRITE BELOW LINE**

**BCA USE ONLY**

Date Application Received: \_\_\_\_\_

Date of Fee Payment: \_\_\_\_\_

BCA Field Crew Verified Accessibility of Sewer Main for Lateral Connection:

Date: \_\_\_\_\_ Field Crew Member Name: \_\_\_\_\_

**BOROUGH OF CONSHOHOCKEN AUTHORITY**

**APPENDIX 4**

**MIPP PRELIMINARY QUESTIONNAIRE**

BOROUGH OF CONSHOHOCKEN AUTHORITY (BCA)  
601 EAST ELM STREET, CONSHOHOCKEN, PA 19428-1914  
PHONE: (610) 828-0979  
FAX: (610) 828-7720

**MUNICIPAL INDUSTRIAL PRETREATMENT PROGRAM  
PRELIMINARY QUESTIONNAIRE  
FORM MIPP-PQ**

PURPOSE: Preliminary screening method to identify potential users whose discharge requires the user to be included into the BCA's Municipal Industrial Treatment Program.

FILING FEES: No Fee

PROFESSIONAL REVIEW FEES: No Fee (costs paid out of escrow)

1. **APPLICANT NAME:** \_\_\_\_\_

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

Telephone: \_\_\_\_\_

2. **CONTACT NAME:**

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

Telephone: \_\_\_\_\_

3. **FACILITY TO BE SERVICED:** \_\_\_\_\_

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

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

Type of Business: \_\_\_\_\_

Projected Date of Initiating Flow: \_\_\_\_\_

Is any non-domestic flow to be discharged? Yes\_\_\_ No\_\_\_

If non-domestic flow to be discharged, what is general nature of discharge:

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Does structure contain floor drains connected to the sanitary sewer?  
Yes\_\_\_ No\_\_\_ Unknown\_\_\_

(If unknown, a dye test or other method of determination shall be conducted by Applicant in the presence of BCA or local representatives)

Does business prepare food? Yes\_\_\_ No\_\_\_

Does business possess a:

Greasetrap: Yes\_\_\_ No\_\_\_  
Oil Separator: Yes\_\_\_ No\_\_\_

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision. Furthermore, I certify that these following were prepared in accordance with a system designed to ensure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true and accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Applicant: \_\_\_\_\_

Title: \_\_\_\_\_

NOTE:

If business is located in Plymouth Township, a copy of this preliminary application to be provided to Plymouth Township, as applicable.

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APPLICANT DO NOT WRITE BELOW LINE: BCA USE ONLY

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Date Application Received: \_\_\_\_\_

BCA OFFICIAL: \_\_\_\_\_



**BOROUGH OF CONSHOHOCKEN AUTHORITY**

**APPENDIX 5**

**CERTIFICATE OF AUTHORITY**



SEWER CONNECTION INSPECTED BY: \_\_\_\_\_ DATE: \_\_\_\_\_

ENGINEERS PUNCH LIST COMPLETE (PIPE TESTING, MANHOLE TESTING,  
EASEMENTS, PLANNING MODULE APPROVAL, FIELD ITEMS, SUITABLE FOR  
OPERATION): Y N

AS BUILTS APPROVED: \_\_\_\_\_

MAINTENANCE BOND RECEIVED: Y N AMOUNT: \_\_\_\_\_