



**County of Passaic
Administration Building**

401 Grand Street • Paterson, New Jersey 07505-2023

**OFFICE OF THE COUNTY ENGINEER
Room 524**

TEL: (973) 881-4456
FAX: (973) 742-3936
TDD: (973) 279-9786

STORM DRAIN CONNECTION PERMIT APPLICATION

DATE: _____

The undersigned,

(Print Name)

Acting as (Owner, Partner or Authorized Corporate Official by a Resolution adopted by the Company's Board of Directors) of

(Company Name)

_____ Partnership

_____ Corporation

Or the Owner of a private residence

Hereby submit formal application to the Board of County Commissioners of the County of Passaic to grant approval to connect a new storm drain into the existing County of Passaic storm drain system within

(Print Name of County Road)

In the Municipality of _____

(Print Name)

If approved, the applicant will agree to the following terms and conditions:

1. The applicant will construct, at their expense, the entire proposed drainage system on their site, and also, the necessary extensions and connections into the County's system within the County's right-of-way. The applicant will supply all materials, labor and equipment to perform said work described and indicated on the submitted construction plans.
2. The applicant agrees to maintain, replace, and repair, when necessary, the constructed system with his own forces and at his own expense.
3. The applicant or their contractor shall obtain a Highway Opening and Use Permits, including payment of all required permit fees, and post the required bonds and insurance with the Passaic County Road Department, prior to commencing work.

4. Work within a County Roadway is only permitted between the period from April 1st to November 15th of any calendar year during allowable working hours on Monday thru Friday, County of Passaic Holidays excluded.
5. A Highway Opening and Use Permits **will not** be issued for the Storm Drain Connection work without Commissioner approval of the Storm Drain Connection Permit.
6. If any curb is to be removed, replaced, or installed, it must be noted on the Highway Opening and Use Permit application.
7. Issuance of a storm drain connection permit to the applicant does **NOT** allow the applicant, developer or contractor to perform any blasting work within the Passaic County right-of-way.
8. The applicant agrees to assume all responsibilities for the work and for any damages or injury which may result from this installation and during the maintenance thereof.
9. The applicant shall comply with any additional conditions as may be required by the Commissioners and/or County Engineer.

Submit the following information and documents with the application:

_____ Two (2) copies of the Construction Plans showing the proposed connection, size of all pipes and drainage calculations; **OR**

_____ Construction Plans and Calculations were submitted as part of a Subdivision and/or Site Plan.

Passaic County Planning Board Site Plan Number SP _____ - _____.

Property Location:

Road Address: _____ Municipality: _____

Block: _____ Lot(s): _____

Signature of Applicant Title

Mailing Address: _____

City State Zip Code

Phone No. & Email: _____

NOTICE TO APPLICANT

Mail the completed application package (no fee required) to: County Engineer, 401 Grand Street, Room 524, Paterson, NJ 07505. An initial application package may be submitted via email to: engineeringpermits@passaiccountynj.org. Original application documents will be required prior to final approval.

ALL CONSTRUCTION WORK for the proposed Storm Drain Connection SHALL BE INSPECTED by the County Engineer or his duly authorized representative in accordance with the Highway Opening and Use Permit.

PLEASE ALLOW 15 BUSINESS DAYS FOR PROCESSING