

ROSS TOWNSHIP SUPERVISORS

MONROE COUNTY, PENNSYLVANIA P.O. Box 276 Saylorsburg, PA 18353

Municipal Garage & Office Phone: (570) 992-4990 www.rosstwpmcpa.gov Fax: (570) 992-4440
email: rosstwp@ptd.net

AMES ZAHOROIKO
Chairman

DAVID SHAY Vice Chairman

RANDY DETRICK Supervisor

DEB BROWN Secretary/Treasurer

Sew	age Application		
Property Owner:	Phone:	Email:	
Mailing Address:	City:	State:	
Applicant <u>:</u>	Phone:	Email:	
Mailing Address:	City:	State:	
Site Location	Tax Map No:		
S	oil Testing Fees		
Soil Probe Inspection (per each test pit evaluation) (Owner Developer provide back hoe)		= \$	ė
Conduct Percolation Test 1-6 hole test site	\$300.00 X	=\$	
Dig Percolation Test Holes 1-6 hole test site	\$200.00 X_	=\$	
Oversee 1-6 percolation test conducted by private cons	ultant \$180.00 X_	=\$	1
	****	Total Ś	
Sewage Permit Applicat	ion Fees & Inspection Fees (check one)	
Conventional System Application/Design Review Fee		\$200.00	
Alternate System Application/Design Review Fee		\$260.00	
Baffle Repair Application & Inspection Fee		\$150.00	
Septic Tanks, Boxes & Gravity Sewers Repair/Replace A	pplication & Inspection Fees	\$150.00	E
Plannir	ng Module Review Fees		
Component 1 and/or Planning Exemptipn Form (Per Re Component 2,3 or 4 (per Review)		\$200.00 \$300.00	
Miscellar	neous Fees & Hourly Rate		
Temporary Portable Toilets Additional System Designs Reviews (per review) Hourly Rate		\$25.00 \$75.00 \$ 65 .00	
	Inspection Fees		
Inspection Fees for Conventional & Alternate Septic Sys Each additional Inspection or re-inspection	etems (4 Inspections)	\$400.00 \$120.00	

Date Received:_____ Cash/Check No.:____ Amount: \$_____ Limiting Zone: ______Perc Rate: _____Pass/Fail_____ DEP No.:______ Date:_____

Comments: