

505 US Highway 9, Lanoka Harbor, NJ 08734 / Phone: 609.242.7111 / Fax: 609.242.7112 Email: info@njwater.org / Website: www.njwater.org

2020 Water / Wastewater System Membership Form

NJDPES # or

System Name:			PWSID #		
County:	Mailing Address:				
City:		State	e:	Zip:	
Phone:	Fax:	Fax: Website:			
System Contact Person:	Title:				
System Contact Email:		Sys	tem Contact Phone:		
			Receive NJWA Mailings l <mark>ies. (with paid System N</mark>	· · ·	
Name:	Title:				
Mailing Address:		City:	State:	Zip:	
Phone:	Fax:		Alt Phone:		
Name:	Title:				
Mailing Address:		City:	State:	Zip:	
Phone:	Fax:		Alt Phone:		
To .	Add Additional Names -	– Please copy fo	orm and complete this s	<mark>ection</mark>	
	al Membership Rates: of service connections – no	ot population	Annual Membership Rate	:	
Connections Rate 1,000 and under \$375.00 1,001 – 2,000 \$425.00	Connections Rate 4,001 – 6,000 \$525 6,001 – 10,000 \$600	.00	# of Additional Memb	erships @ \$30.00 ea:	
2,001 – 4,000 \$475.00	10,001 and over \$675		Total Membership Due:		
Make Purchase Orders	Credit Card: Visa	_ MasterCard	AMEX or Purch	ase Order	
and/or Check Payable to:	Card #:		Expiration Date:	<mark>CID#:</mark>	
New Jersey Water Association	Name on Card:	Signature:			
505 US Highway 9 Lanoka Harbor, NJ 08734	Card Billing Address:				
	Membership Ap		so be found on our website		
	Credit Card Payments are also accepted through website. Thank you for your support!				