



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

2026 Utility / System Membership Form

System Name: _____ (WW) NJDPES # or
(W) PWSID # _____

County: _____ Mailing Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____ Website: _____

System Primary Contact Person: _____ Title: _____

System Primary Contact Email: _____ System Contact Phone: _____

System Membership includes one (1) contact person. Additional employee memberships can be purchased for \$35.00 each with a paid system membership.

Name: _____ Title: _____

Mailing Address: _____ City: _____ State: _____ Zip: _____
(If different from above)

Phone: _____ Fax: _____ Alt Phone: _____ Email: _____

Name: _____ Title: _____

Mailing Address: _____ City: _____ State: _____ Zip: _____
(If different from above)

Phone: _____ ~~\$600.00~~ Fax: _____ Alt Phone: _____ Email: _____

To Add Additional Names – Please copy form and complete this section

Annual Membership Rates:

Based on the number of service connections – not population

Connections	Rate	Connections	Rate
1,000 and under	\$500.00	4,001 – 6,000	\$695.00
1,001 – 2,000	\$560.00	6,001 – 10,000	\$780.00
2,001 – 4,000	\$625.00	10,001 and over	\$875.00

Annual Membership Rate: _____

of Additional Memberships @ \$30.00 ea: _____

Total Membership Due: _____

Make Purchase Orders and/or Check Payable to:

New Jersey Water
Association
505 US Highway 9
Lanoka Harbor, NJ 08734

Credit Card: Visa _____ MasterCard _____ AMEX _____ or Purchase Order _____

Card #: _____ Expiration Date: _____ CID#: _____

Name on Card: _____ Signature: _____

Card Billing Address: _____

**Membership Applications can also be found on our website (www.njwater.org).
Credit Card Payments are also accepted through website.**

Thank you for your support!