

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

2025 Utility / System Membership Form

(WW) NJDPES # or System Name: _____ (W) PWSID # County: Mailing Address: City: _____ State: ____ Zip: ____ Phone: _____ Fax: ____ Website: _____ System Primary Contact Person: _____ Title: System Contact Phone: System Primary Contact Email: System Membership includes one (1) contact person. Additional employee memberships can be purchased for \$30.00 each with a paid system membership. Name: Title: ______ City: ______ State: _____ Zip: _____ Mailing Address: (If different from above) Phone: _____ Fax: ____ Alt Phone: ____ Email: Name: Title: Mailing Address: _____ City: ____ State: ____ Zip: ____ (If different from above) Phone: _____ Fax: _____ Alt Phone: ____ Email: ____ To Add Additional Names – Please copy form and complete this section **Annual Membership Rates:** Annual Membership Rate: Based on the number of service connections – not population Connections Rate Connections Rate # of Additional Memberships @ \$30.00 ea: 1.000 and under \$480.00 4,001 - 6,000\$670.00 6,001 – 10,000 1,001 - 2,000\$540.00 \$750.00 Total Membership Due: _____ 2,001 - 4,000\$600.00 10,001 and over \$840.00 Credit Card: Visa _____ MasterCard ____ AMEX ___ or Purchase Order **Make Purchase Orders** and/or Check Payable to: Card #: _____ CID#: _____ New Jersey Water Name on Card: Signature: Association 505 US Highway 9 Lanoka Harbor, NJ 08734 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!