



THE JERSEY CITY MUNICIPAL UTILITIES AUTHORITY

13 – 15 LINDEN AVE. EAST • JERSEY CITY, NJ 07305 •
TEL: (201) 432-1150 • FAX: (201) 432-1576



**APPLICATION TO OBTAIN A CREDIT
FOR VOLUNTARY LEAD SERVICE LINE REPLACEMENT**

Only For Use in the Jersey City Water Supply System

NAME OF OWNER/COMPANY:		
PROPERTY ADDRESS:		
CITY:	STATE:	ZIP:
BLOCK #:	LOT#:	
CONTACT PERSON:		
MAILING ADDRESS:		
WK PHONE:	E-MAIL:	

The following checklist items pertaining to the replacement of a lead service line must be include in this application:

<input type="checkbox"/> Executed JCMUA Report My Service Line Material form. The form can be found at https://www.leadfreejc.com
<input type="checkbox"/> Copies of closed permit(s) as required to perform the LSL replacement
<input type="checkbox"/> Verification from a licensed plumber that the LSL has been replaced, including the cost to perform the work, quantities of material replaced, and proof of payment for the replacement work
<input type="checkbox"/> Photographs of the new service line

I, the undersigned, being duly sworn, upon my oath depose and say: The claims and statement set forth hereinabove, and the substantiating data attached hereto, are correct.

Subscribed and sworn before me;

SIGNATURE OF OWNER/COMPANY:	DATE:
TITLE (IF APPLICABLE):	
ADDRESS:	

(FOR OFFICIAL USE)

APPROVED BY:	DATE APPROVED:
--------------	----------------