

## Application package cover letter

Dear CCO Applicant:

Enclosed are documents pertaining to your application to the Manalapan Township Health Department for a Continued Certificate of Occupancy (CCO). An application is required if your property is served by a septic system and/or well. The documents enclosed are:

1. Application form
2. List of water testing laboratories
3. Review letter from buyer for verification of septic tank(s) cleaning

### APPLICATION FORM

The application form should be fairly self-explanatory. The application must be completed in full. A fee of \$40.00 is required with submission of the application.

### WELL

The department requires that the well water be tested by an NJDEP certified testing laboratory for the following parameters: Total Coliform, pH, iron, manganese and nitrates. The sample of water must be collected by the laboratory. The results must meet the NJ drinking water standards for each of these parameters. A list of laboratories that perform these analysis services is attached. If testing has already been performed, these results may be satisfactory if it meets the above procedures and was collected within six (6) months of anticipated closing date.

Be advised that the NJ Private Well Testing Act became effective on September 14, 2002. This act requires testing beyond the above referenced parameters. Specifically the act requires testing for fecal coliform, volatile organics, lead and mercury. For more information on these requirements you are encouraged to call the NJ Department of Environmental Protection at 1-866-4P W-TEST or via Internet at [www.state.nj.us/dep/pwta](http://www.state.nj.us/dep/pwta). This department will require proof that the water has been tested for these parameters. Any exceedences of the drinking water for these parameters will require remediation or acknowledgement of the exceedences and a written plan for remediation including who will bear responsibility to remediate.

### SEPTIC SYSTEM

The department requires that the septic tank(s) be cleaned within two (2) years of the proposed closing date as proof of proper maintenance. This may be accomplished by submitting a copy of the receipt for services or a letter on the cleaning company letterhead documenting the service. It is important that if you have more than one (1) septic tank (including dry wells for laundry systems) that each one is cleaned.

This department requires that the buyer acknowledge the proof of pumping submitted to this department. The letter to be used for this purpose is enclosed. You should note that if the receipt or statement from the cleaning service identifies anything out of the ordinary this may become a topic of discussion/negotiation with the other party. There are some exceptions whereby this department may order resolution. These exceptions include:

- 1) A statement of malfunction according to the definition in the septic system regulations (i.e. sewage backing up into house or sewage flowing onto the surface of the ground);
- 2) The determination that a component of the septic system is in disrepair and needs to be repaired to bring it back in compliance with original construction. This may include a cracked cover, missing or broken baffle(s), or cracked or broken pipe to name a few.

Any work required to repair a septic system will need a permit issued by this department before any work is performed. The fee for this permit is \$125.00 regardless of the cost of the work.

If you have any questions please feel free to contact this office and speak to one of the department's environmental health specialists.

**Form letter for acknowledgement of septic tank pumping**

To: Manalapan Health Department  
Re: Continued Certificate of Occupancy Application -  
Acknowledgement of Septic Tank(s) Cleaning/Evaluation

Please be advised that I/we are the buyer of property as listed below. I/we understand the Health Department only requires proof of septic tank(s) pumping. An evaluation of the current working condition of the septic system is completely my/our choice and I/we understand that it is general practice to have this work performed. Further, I/we are aware that the New Jersey Department of Environmental Protection has developed an evaluation tool that is available at [http://www.state.nj.us/dep/dwq/pdf/inspection\\_guidance.pdf](http://www.state.nj.us/dep/dwq/pdf/inspection_guidance.pdf)

I/we have reviewed the documentation submitted to the Manalapan Township Health Department as proof of septic tank(s) cleaning and reference it below. I/we understand that if there are any observations or determinations documented on the proof of cleaning, beyond the service of cleaning the septic tank(s), or on the evaluation, that I/we bear responsibility for resolving this/these issue(s) with the seller of the property. I/we understand the Manalapan Township Health Department can only intercede when an evaluation or pumping report clearly identifies a malfunction of the septic system (per NJAC 7:9A).

Lastly, I/we understand that I/we have open access to the Manalapan Township Health Department files for this property (if they exist) in accordance with the open public records act.

Property Address \_\_\_\_\_ Block \_\_\_\_\_ Lot \_\_\_\_\_  
Buyer Name \_\_\_\_\_

Description of proof being offered (include name of company/date/of service or letter/reference # if available):  
Pumping Receipt information \_\_\_\_\_  
Evaluation Report information \_\_\_\_\_

By signature I/we, the buyer(s), acknowledge and accept the conditions as described above.

\_\_\_\_\_  
Signature(s) \_\_\_\_\_  
\_\_\_\_\_  
Date(s) \_\_\_\_\_

## **WATER TESTING LABORATORIES**

(Certified by the State of New Jersey)

Garden State Labs  
Hillside, NJ  
1-800-625-7200

J. R. Henderson Labs  
Beachwood, NJ  
732-341-1211

Precision Analytical Services  
Toms River, NJ  
1-800-806-8378

Ocean Well Testing-Ocean Environmental  
Toms River Area  
732-240-7004

The State of New Jersey certifies laboratories to perform environmental analysis. Analysis required by Manalapan Ordinance are:

Total Coliform  
pH, Iron, Manganese, Nitrates

You must verify that the laboratory is certified for each of those parameters at the time of contracting the service. The laboratory must collect the sample because pH must be analyzed within fifteen (15) minutes of collection (State law). Manalapan Ordinance requires that the results for these parameters meet State standards.

Be advised that the NJ Private Well Testing Act requires testing for the following additional parameters:

Fecal Coliform, Volatile Organics, Lead, Mercury

This department requires proof that these parameters have been tested. Any exceedences of the drinking water standards will require remediation or acknowledgement of the exceedences and a written plan for remediation including who will bear responsibility to remediate.

[h/en/cco/Water Testing Labs list](#)

**Application**

Application #
Date
Fee

**HEALTH DEPARTMENT  
Manalapan Township**

Phone: 732-446-8345  
Fax: 732-446-1576

**120 Route 522  
Manalapan, NJ 07726**

Fee: \$40.00

Checks Payable To: Manalapan Township

**APPLICATION FOR  
CERTIFICATE OF CONTINUED OCCUPANCY  
WELL AND/OR SEPTIC ONLY**

Address of Property \_\_\_\_\_ Block \_\_\_\_\_ Lot \_\_\_\_\_

Owner of Property \_\_\_\_\_ Phone # \_\_\_\_\_

Owner's Address (if different) \_\_\_\_\_

Type of Structure: Residential \_\_\_\_\_ Apt/Condo \_\_\_\_\_ Business \_\_\_\_\_

Occupancy Change Due To: Sale \_\_\_\_\_ Rent \_\_\_\_\_ Other (explain) \_\_\_\_\_

Name, Phone # of Contact Person \_\_\_\_\_

Name of Buyer or Tenant \_\_\_\_\_

Realtor's Name, Address & Phone # for Owner, if Applicable:

\_\_\_\_\_

Date of Closing/Occupancy: \_\_\_\_\_

\_\_\_\_ Check Here if Served by Individual Well (Attach copy of PWTA test results)

\_\_\_\_ Check Here if Served by Septic System

\_\_\_\_\_ Date of Last Septic Tank Pump Out (Must submit copy of pump receipt and buyer letter)

I understand that the septic tank pump out information is reviewed for compliance with applicable maintenance requirements only for determination that the septic system is functioning properly. I understand that I must arrange for this privately. I further understand that the water supply is being tested for only those parameters required per Local Ordinance (by reference NJAC 7:10-12.31). Any further testing must be arranged privately with an independent testing laboratory. Any necessary re-testing for failed parameters will incur additional cost.

\_\_\_\_\_  
Signature of Buyer

\_\_\_\_\_  
Signature of Seller or Landlord (rental unit)

**CCO Compliance Activity  
For department use only**

**A.. Septic System Maintenance Activity:**

\_\_\_\_ Septic Tank pumping receipt submitted and reviewed to be less than

two (2) years prior to anticipated date of closing.

Main Tank \_\_\_\_\_ Laundry tank/dry well \_\_\_\_\_ Buyer letter \_\_\_\_\_

**B. Well Water Analysis Activity:**

\_\_\_\_\_ Water Test results received and reviewed and deemed satisfactory (Township Ordinance).  
Approval date \_\_\_\_\_ Initial \_\_\_\_\_ Date of satisfactory bacteria test \_\_\_\_\_

\_\_\_\_\_ PWTA testing requirements compliance.

Approval Date \_\_\_\_\_ Initial \_\_\_\_\_

\_\_\_\_\_ For multiple entity buildings - reports on proper functioning of septic system  
and description of new business and current occupancy submitted and reviewed  
Approval date \_\_\_\_\_ Initial \_\_\_\_\_

**C. CCO Issuance**

\_\_\_\_\_ Date CCO requirements met (Permit issued)

**D. Expiration**

\_\_\_\_\_ Date at which main septic tank pump out expires (2 years from date of tank pumping)

\_\_\_\_\_ Date at which laundry septic tank pump out expires (2 years from the date of tank pumping)

\_\_\_\_\_ Date at which water test expires (6 months from date of satisfactory bacteria test)

\_\_\_\_\_ Date at which PWTA water test results expires (1 year from satisfactory results)

\_\_\_\_\_ For multiple entity buildings - date of private septic system certification (3 months)

\_\_\_\_\_ Date at which C/O expires (earliest of preceding activities)