



**Borough of Medford Lakes**  
1 Cabin Circle Medford Lakes, NJ 08055

## **WASTEWATER DEPARTMENT**

Application for Certificate of Extraneous Flow Elimination Compliance  
[Sump Pump/Roof/Floor Drain Inspection]

Address: \_\_\_\_\_ Medford Lakes, NJ

Block: \_\_\_\_\_ Lot(s): \_\_\_\_\_

Owner: \_\_\_\_\_

Phone#: \_\_\_\_\_ Email: \_\_\_\_\_

Occupant: \_\_\_\_\_  Same as Owner

Phone#: \_\_\_\_\_ Email: \_\_\_\_\_

Authorized Sales Agent: \_\_\_\_\_

Sales Agent's Firm: \_\_\_\_\_

Phone#: \_\_\_\_\_ Email: \_\_\_\_\_

Settlement Date: \_\_\_\_\_

**Fees**

More than 10 Business Days Prior to Settlement: **\$50**

4-10 Business Days Prior to Settlement: **\$70**

Less than 4 Business Days Prior to Settlement: **\$125**

Re-Inspection: **\$35**

**Inspector will contact applicant once paid application is received.  
Office hours are Monday-Friday 7a-2:30p**

Office Use Only

**Payment Amount:** \_\_\_\_\_  **Cash**  **Check #:** \_\_\_\_\_

**Date Received:** \_\_\_\_\_ **Received By:** \_\_\_\_\_

**Date Inspection Completed:** \_\_\_\_\_

**Certificate Issued:**  **Pass**  **Fail:** \_\_\_\_\_

Reason for Failure

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_