## Lake Owassa Community Association

		R APPLICATION		the state of the s
	Date Rec'd			
nments:				
1. LAKE PROPERT a. Township Bloo	Υ ck#	Lot#	LOCA Area #	
b. Name (s) of T	TITLED OWNERS:		_ Revwd. by Boar	rd
on Association Please state t	he name of the VOTI	NG MEMBER		-
d. Property MAIL	_ING ADDRESS:	(number)		( street)
	ess should MAIL BE S			
3. To which addre		SENT? Home		
<ol> <li>To which address</li> <li>TELEPHONE # Lake</li> </ol>	ess should MAIL BE S	SENT? Home	_ Lake	
<ol> <li>To which address</li> <li>TELEPHONE # Lake</li> <li>EMAIL ADDRESS</li> </ol>	ess should MAIL BE S HomeCell	SENT? Home	_ Lake	
<ol> <li>To which address</li> <li>TELEPHONE # Lake</li> <li>EMAIL ADDRESS</li> <li>Please give the second second</li></ol>	ess should MAIL BE S HomeCellCell	SENT? Home	_ Lake	
<ol> <li>To which address</li> <li>TELEPHONE # Lake</li> <li>EMAIL ADDRESS</li> <li>Please give the a. Is Property</li> </ol>	ess should MAIL BE S HomeCell SShe following informat	SENT? Home	_ Lake property: S TO THE LAKE?	
<ol> <li>To which address</li> <li>TELEPHONE # Lake</li> <li>EMAIL ADDRESS</li> <li>Please give the a. Is Property</li> <li>How many</li> </ol>	ess should MAIL BE S HomeCell SS he following informat lakefront? if not,	SENT? Home	_ Lake property: IS TO THE LAKE?	
<ol> <li>To which address</li> <li>TELEPHONE # Lake</li> <li>EMAIL ADDRESS</li> <li>Please give the a. Is Property</li> <li>How many</li> <li>Source of V</li> </ol>	ess should MAIL BE S HomeCell SS he following informat lakefront? if not, DWELLINGS are ther	SENT? Home	_ Lake property: S TO THE LAKE?  Other	
<ol> <li>To which address</li> <li>TELEPHONE # Lake</li> <li>EMAIL ADDRESS</li> <li>EMAIL ADDRESS</li> <li>Please give the a. Is Property</li> <li>B. How many</li> <li>C. Source of V</li> <li>d. IF LAKE, for</li> <li>What is you performance DATE O</li> </ol>	ess should MAIL BE S HomeCell SS he following informat lakefront? if not, DWELLINGS are ther VATER SUPPY? Well	SENT? Home ion about your lake p where is your ACCES re on the property? Lake king Bathing WATER DISPOSAL: O PING: or	_ Lake property: S TO THE LAKE?  Other Toilet G Conventional Sep r Other	 Garden tic High

A properly functioning septic system is required. Please provide a certified onsite subsurface 7) sewage disposal, "septic", system inspection report, including the inspector's certification number. A copy of New Jersey's onsite system inspection form is attached for your convenience. All application approvals are subject to a thorough review of the septic system inspection report.

Please submit a survey of your property, showing the location of the house(s), outbuildings, 8) well, and septic system including tank and leach fields. If your property does not have a functioning

septic system, we would still request that the survey provide the location of any substandard sewage disposal system, for example: cesspool, privy, outhouse, latrine, or pit toilet.

9. Please give the following information information information information information in the second seco	ormation o <u>Age</u>		HE HOUSEHOLD (optional) Occupation (present or former)
Name	<u>Aye</u>	<u>dender</u>	
HOBBIES or SPECIAL INTERES	STS of the f	family members:	
			ase check if you or any member
of your household would be int		serving on one of	these committees:
Septic	r	)roporty	
Water Recreation	_ r	Property	
Environment	- C	ocks, Floats & Sh	oreline
Fishing	V	oting & Proxies	
Archives			
			TO COMPLY WITH THE BY-LAWS UNITY ASSOCIATION AND THAT
I /WE WILL BE BOUND BY AND			
REGULATIONS IN THE USE OF			
•••••••••••••••••••••••••••••••••••••••			

(OWNER)

(OWNER)

This completed application **MUST** be submitted to the Lake Owassa Community Association (LOCA), office of the Secretary, accompanied by an initiation fee of **\$2,300** plus tax of \$152.38 (**\$2,452.38**) and a **COPY of the RECORDED DEED** of your property showing the Sussex County Hall of Records recording information. This application will be reviewed at the next scheduled meeting of the Board of Governors. You will be notified of the Board's action immediately following the meeting.

PLEASE RETURN TO: Lake Owassa Community Association P.O. Box 657 Branchville, N.J. 07826

March 22, 2023