

The remaining sewer segments within this subdivision have been found to be acceptable under normal approval procedures. Certified copies of all test results completed by the testing agency have been attached to this application.

The undersigned agrees to place in escrow with Upper Saucon Township for the following services associated with an on-going flushing program:

Item 1	Cleaning and Flushing of sanitary sewers	\$150.00/ hour
Item 2	Hours required per flushing activity	_____ hrs.
Item 3	Cost per Flushing Activity (Item 2 * Item 3)	\$_____
Item 4	Frequency of Flushing Activities per year	_____
Item 5	Total Annual Cost for Flushing Activities (Item 3 * Item 4)	\$_____
Item 6	Flushing Escrow Period	_____ years
Item 7	Total Escrow Payment (Item 6 * Item 7)	\$_____

The undersigned acknowledge that it/they are not entitled to any refund of any unused escrow funds and further acknowledge that Upper Saucon Township and Upper Saucon Township Municipal Authority are to be held harmless and/or indemnified from any and all liability or damages as it relates to either the escrowing of the funds for the On-Going Flushing Program or as it relates to any and all work done regarding the actual flushing of the subject sewer segments.

IN WITNESS WHEREOF, the parties hereto have executed this Agreement the day and year first above written.

DEVELOPER

CONTRACTOR

(Name and Title)

(Name and Title)

BY _____
(Name and Title)

BY _____
(Name and Title)

(CORPORATE SEAL)

(CORPORATE SEAL)