

MILLSTONE TOWNSHIP

USE, BULK VARIANCE AND INFORMAL CONCEPT PLAN APPLICATION COMPLETENESS CHECKLIST

PROJECT NAME _____ APPLICATION NO. _____
 OWNER: _____ TELEPHONE _____
 ENGINEER/DESIGNER: _____ TELEPHONE _____
 ATTORNEY: _____ TELEPHONE _____
 PERSON COMPLETING THIS FORM _____ DATE _____

FOUR (4) COPIES OF THIS FORM MUST BE COMPLETED AND RETURNED TO THE ADMINISTRATIVE OFFICER FOR THE INITIAL SUBMISSION

All of the following items must be shown on the submitted plans or attached thereto for the Use and Informal Concept Plan Application to be considered for Completeness Review. If a Waiver is requested from any of the following items, the item should be checked where provided and an explanation of the reasons for the Waiver explained under Section II.

I. USE, BULK VARIANCE AND INFORMAL CONCEPT PLAN

	Waiver	Yes	No
A. Submitted Application Form (4 copies)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Submitted Current Signed and Sealed Property Survey (4 copies)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
C. Project Plat Information (4 copies)			
1. Name and address of owner and Applicant	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Notarized signature/affidavit of ownership. If Applicant is not the owner, state Applicant's Interest in plan. (Final plat prior to filing).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Name, signature, license number, seal and address of professional engineer, land surveyor, architect, as applicable, involved in preparation of plat.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

	Waiver	Yes	No
4. Title block denoting type of application, tax map sheet, county, name of municipality, block and lot, and street location.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Key map at specified scale showing location to surrounding properties, streets, municipal boundaries, etc., within 500 feet of property.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. North arrow and scale.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Schedule of required zone district requirements vs. proposed including lot area, FAR, width, depth, yard setbacks, building coverage, open space, parking, etc.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Acreage of tract to the tenth of an acre.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Size and location of any existing and proposed structures with all setbacks and length measurements of perimeter building walls dimensioned.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Size and location of all existing structures, easements and Rights-of Way within 200 feet of the site boundaries.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Any existing or proposed easement or land reserved for or dedicated to public uses.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Property owners within 200 feet of subject property. (Use AND Bulk Variance Only)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Location of cliffs, gravel outcroppings, streams, floodstreams, floodplains, wetlands or other environmentally sensitive areas on or within 200 feet of the project site.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. List variances required or requested.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15. List of requested design waivers or exceptions.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

	Waiver	Yes	No
16. Size and location of all existing or proposed streets. (Use & Concept Plan Only)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17. Topographical features of subject property from aerial photography/topography or topography survey in accordance with National Geodetic Vertical Datum-1988. Should GIS Mapping be utilized for topographic information supplemental field data shall be submitted to confirm accuracy.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18. Boundary , limit, nature and extreme of wooded areas, specimen trees, and other significant physical features (details may vary)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
19. Overall concept plan for all phases of project. (Use & Concept Plan Only)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20. Identification and calculation of usable buildable areas and all Critical Areas Pursuant to Section 4-4.7	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

D. Supplemental Documents

1. List of all Federal, State, County, regional and/or municipal approvals or permits required.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Copies of any existing or proposed deed restrictions or covenants.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Proof that taxes are current.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Disclosure Statement. (See NJSA 40:55D-48.1 et seq.).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Payment of all applicable fees.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. List of witnesses and their expertise.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Recent aerial photo of the site and surrounding areas within 500 feet.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Signed and Sealed Architectural Drawings	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

II. WAIVERS

Waiver Requested From: _____

Reason: _____

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Reason: _____

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Reason: _____

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Reason: _____

III. If any item in this checklist is not provided with the submission, the application will be deemed INCOMPLETE and will not be heard by the Board. If Applicant is seeking waivers from any of the above items, the application will be deemed INCOMPLETE and will be placed on the next available Board Agenda for reviewing waivers only.

IV. **AFFIDAVIT OF COMPLETENESS**

I/we, the undersigned, certify that this application fully complies with all standards and requirements contained in the Municipal Land Use Law, N.J.S.A. 40:55D-1 et. Seq. and amendments thereto and the current Zoning Ordinance of the Township of Millstone. I/we further certify that all information contained herein is complete and accurate to the best of my/our knowledge.

_____		_____	
Applicant/Owner Name (Print or Type)		Professional's Name (Print or Type)	
_____		_____	
Signature	Date	Signature/Seal & License No.	Date