## MILLSTONE TOWNSHIP APPLICATION FOR MAJOR SOIL REMOVAL AND IMPORT PERMIT FOR OVER 400 CUBIC YARDS

THE APPLICANT SHALL COMPLY WITH CHAPTER 23 "SOIL REMOVAL AND IMPORT" ORDINANCE OF THE TOWNSHIP OF MILLSTONE, MONMOUTH COUNTY, NEW JERSEY.

1.		PLICANT:				
	TEL	EPHONE:			FAX:	
2.	OWNER OF PROPERTY: ADDRESS:					
	TEL	EPHONE:			FAX:	
3.	PRO	OPERTY:				
		X MAP SHEET NO.: STING ZONE:	-		, ACREAGE	
4.	NAN	GINEER/LAND SURV ME: DRESS:	EYOR F		PLANS:	
	TEL	EPHONE:				
5.		SONS INVOLVED W MOVAL AND IMPOR		E IMPLEME	NTATION OF TI	HE APPROVED SOIL
	<b>A.</b>	APPLICANT'S RE ADDRESS:	PRESEN			
		EMERGENCY TE	LEPHO	NE		
	В.	FIELD SUPERVIS ADDRESS:	OR			
		TELEPHONE				
	C.	EXCAVATION CO ADDRESS:	ONTRAC	CTOR		
		TELEPHONE		Paga 1 of	1	

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	D.		ER (SPECIFY) RESS:				
		TEL	EPHONE				
6.	DESC	CRIPT	ION OF SOIL REM	MOVAL AND IMPORT OPERATI	ION		
7.	THE	TYPE	AND VOLUME O	F SOIL TO BE REMOVED OR IN	<b>APORTED:</b>		
8.	PROPOSED HAUL ROUTES						
9.	ноп	RS OF	OPERATION:				
•	1100	<b>A.</b>	DAILY STARTI	NG TIME:			
		B.	DAILY FINISHI	ING TIME:			
10.	COM	MENO	CEMENT/COMPL	ETION DATE:			
		A.	COMMENCEM	ENT DATE			
		B.	ESTIMATED CO	ENT DATE OMPLETION DATE			
			TECTIVE MEASUI ACCESS TO PRO	RES TO BE EMPLOYED TO KEE PERTY:	CP UNAUTHORIZED		
12. STR	LIST EETS:	EQUI	PMENT AND/OR	METHOD TO BE EMPLOYED IN	CLEANING PUBLIC		

13.	APPLICATION COMPLETENESS CHECKLIST	
ти	TWELVE (12) COPIES OF THE FOLLOWING IS APPLICATION:	DOCUMENTS ARE REQUIRED WITH
тні	A. COMPLETE SIGNED APPLICATION	
	B. MASTER SOIL REMOVAL PLAN, PER O	ORDINANCE SECTION 23-3 2(2)6
	C. HYDROLOGIC CALCULATION PER O	
	D HYDRAULIC CALCULATION PER ORI	
	E. STRUCTURAL CALCULATION PER OF	
	F. ENVIRONMENTAL IMPACT STATEME	
	G. PROOF OF APPROVAL FROM OTHER	
	H. SOIL BORING LOGS	00 ( 220 ( 22 ) 22 2 2 2 2 2 2 2 2 2 2 2 2 2 2
	I. TRAFFIC SAFETY PLAN	
	J. PROOF OF GENERAL LIABILITY INSU	RANCE
14.	APPLICATION FEE:	<u>\$1,000.00</u>
15.	ESCROW FOR REIMBURESMENT OF PROFE SOIL TESTING	SSIONAL REVIEW, INSPECTION AND
	COSTS	<u>\$6,000.00</u>
PLE	CASE DATE AND SIGN	
NAN	ME OF APPLICANT	
SIG	NATURE OF APPLICANT	DATE
NAN	ME OF OWNER (If different than Applicant)	
SIG	NATURE OF OWNER (If different than Applicant)	DATE
<u>IF A</u>	APPLICATION IS SUBMITTED BY CORPORATIO	N, AFFIX SEAL
FIR	M, CORPORATION OR PARTNERSHIP	
ASS	ISTANT SECRETARY	
SEC	CRETARY	

For Office Use Only:	
Application received (date):	
Plans received:	
Application Fees:	B
(Check #)	C
Escrow Fees:	<u></u>
(Check #)	
Reviewed By:	
Approved By:	Bond Required:
Denied:	Reason For Denial: