TOWN OF DOVER COUNTY OF MORRIS 37 North Sussex Street, Dover N.J. 07801 (201) 366-2200 LAND USE APPLICATION					
	FOR TO	OWN USE ONLY			
For Action By :	🗌 Planning Board				
Application No.:		Date Filed:			
Application Fees:		Initial Escrow Deposit:			
Taxes Paid To :		Meeting Date:			
Referrals:	🗌 Fire 🛛 Tax Assesso	or 🗌 Shade Tree 🗌 MCPB 🔄 Other :			
APPLICANT					
Name:					
Address:					
		Telephone Number:			
Pursuant to NJSA 40:55D-48 interest in any partnership and corporation or partnership we addresses of the non-corpora necessary to fully comply Name 1 2	.1, the names and addresses of a pplicant must be disclosed. In acc hich owns at least 10% interest ate stockholders and partners excernance Address	□ Partnership □ Individual Ill persons owning at least 10% of the stock in a corporate applicant or 10% ordance with NJSA 40:55D-48.2 that disclosure requirement applies to any in the applicant followed up the chain of ownership until the names and beeding the 10% ownership criterion have been disclosed . Attach pages as s Interest			
SUBJECT PROPERTY Location/Address:					
BIOCK:		Lot(s):			
Amended or Revised Numbe Numb SITE PLAN:	d Minor Subdivision Amended or Rev r of lots to be created (inclu- ber of proposed dwelling uni- Site Plan Approval (EWSP)	ts (if applicable):			
Area to be disturbed:	Number	of proposed dwelling units (if applicable):			
Existing Use(s):					
Existing Use(s).					
Proposed Use(s):					
(NJSA 40:55D-70b)	cept Development Plan Administrative Officer pretation or Special Question hip" (NJSA 40:55D-70c(1)) antial benefit"	 Variance Relief - "Expansion of Non-Conforming Use" (NJSA 40:55D-70d(2)) Variance Relief - "Conditional Use Standard Deviation" (NJSA 40:55D-70d(3)) Conditional Use Permit (NJSA 40:55D-67) Direct issuance of a permit for a structure in a bed of a mapped street, public drainage way, or flood control basin (NJSA 40:55D-34) Direct issuance of a permit for a lot lacking street frontage (NJSA 40:55D-35) 			

LAND USE APPLICATION (cont.)

PROPERTY OWNER			
Property Owner is:		–	
Same as Applicant			
If property owner is other than t		•	
Address	S:		
Telephone Number	r:		
SUBJECT PROPERTY			
Block:			
		Total Area	
Last Previous Occupancy:			
Prop. Lot Coverage: <u>%</u>	Prop. Building Cover	age: <u>%</u>	Prop. Height of Building:
Yard	Required	<u>Existing</u>	Proposed
Front			
Rear			
Side			
	k of adjacent buildings v	within subject block	·
	it of adjacont banango i		
ZONING DISTRICT(S)			
R-1 (Single-Family-7,500 SF)	<u>RESIDE</u> R-1S (Single-Family- S		R-2 (Single-Family-5,000 SF)
\square R-3 (Double Family-7,500SF)	R-3A (Double Family/R	coming House)	R-4 (Multifamily Garden Apt)
	NON-RES		_ 、 , , , ,
C-2 (General Commercial)	C-3 (Commercial - Lt. I		
	IND/OP (Industrial/Offic		RAD (Redevelopment Area Distr.)
	DOWNTOWN		
C-1 (Retail Commercial)	D1 (Station Area)		D2 (Blackwell St. Historic)
D3 (E. Blackwell Bus.)	D4 (S. Downtown)		BHRPA (Bassett Hwy. Redev. Plan Area)
Access Location(s):			
	restrictions covenants	easements asso	ciation by-laws, existing or proposed
on the property?			
Existing: 🗌 Yes (attac	h copies) 🗌 No	Proposed:	🗌 Yes (attach copies) 🗌 No
VARIANCES, DEVELOPMENT S Section(s) of Ordinance from	which a variance is requ	Jested (attach add	itional pages as necessary).
			nional pages as neocesary).
Section(s) of Ordinance from	which Development Sta	ndards waiver is re	equested (attach additional pages as
necessary):			
Waiver(s) Requested of Chec	klist Submittal Requiren	nents (attach addit	ional pages as necessary):
DESCRIPTION OF APPLICATIO	N of the application and th	e changes to be m	ade at the premises including the

Explain in detail the exact nature of the application and the changes to be made at the premises, including the proposed use(s) of the premises (attach pages as needed):

Describe all on-site, off-site and off tract improvements proposed:

Describe any prior applications to the Planning or Zoning Board for this property, including date, applicant, nature of application and Board action:

SUBMITTALS

List of plats and other material being submitted in support of your application (attach pages as needed):

Title	No. of Copies	Prepared By
		Propose To Testify?
Applicant's Attorney(Required for Corporation	ons)	<u>(Yes/No)</u>
Address		
- Emoil	Fax	
Applicant's Engineer Address		
Fmail	Fax	
Applicant's Planning Consultant		
Telephone	Fax	
Other Professional		
Field of Expertise Address		
T (1) (1) (1)	Fax	

CERTIFICATIONS

applicant or that I am an Officer of the Corporate app	als submitted are true. I further certify that I am the individual licant and that I am authorized to sign the application for the		
corporation or that I am a general partner of the partner (If the applicant is a corporation this must be signed by an au signed by a general partner.)	thership applicant. thorized corporate officer. If the applicant is a partnership, this must be		
Sworn to and subscribed before me this day of, 20,	APPLICANT:		
NOTARY PUBLIC	(Printed Name)		
	(Signature of Applicant)		
applicant to make this application and that I agree to the decision in the same manner as if I were the appl am an Officer of the Corporate Owner and that I am a am a general partner of the partnership Owner.	the subject of this application, and that I have authorized the be bound by this application, the representations made and licant. I further certify that I am the individual Owner or that I authorized to sign the application for the Corporation or that I thorized corporate officer. If the applicant is a partnership, this must be		
Sworn to and subscribed before me this day of, 20,	OWNER:		
NOTARY PUBLIC	(Printed Name)		
	(Signature of Applicant)		
	n to members of the various town government boards and the subject premises for inspection and study pertaining to or denied. OWNER:		
NOTARY PUBLIC	(Printed Name)		
Sworn to and subscribed before me this day of, 20	(Signature of Applicant) APPLICANT:		
NOTARY PUBLIC	(Printed Name) (Signature of Applicant)		
Escrow			

I understand that the sum of \$_______ has been deposited in an escrow account in accordance with the Code of the Town of Dover. I further understand that the escrow account is established to cover the cost of professional services including engineering, planning, legal and other expenses associated with the review of submitted materials. Sums not utilized in the review process shall be returned. If additional sums are deemed necessary, I understand that I will be notified of the additional amount and shall add that sum to the escrow account within fifteen (15) days.

Date

Signature of Applicant