

Elsinboro Township
Planning Board
Form - 2

DEVELOPMENT APPROVAL APPLICATION

Application Number: _____ (*provided by Board Secretary*)

1. **Application is hereby made for the following action(s):**

- Check appropriate application type(s)
- a. *Minor Subdivision Approval*
- b. *Classification of Plat as Major Subdivision*
- c. *Preliminary Approval of Major Subdivision Plat*
- d. *Final Approval of Major Subdivision Plat*
- e. *Site Plan Review*
- f. *Bulk Variance Request*

**Variances
Requested:**

- g. *Use Variance Request*

**Use
Requested:**

- h. *Conditional Use Approval*

**Use
Requested:**

- i. *Appeals (Specify)*

2. **This is an Original Application (Y/N) ___**

This is a Resubmission of Application # _____

3. **Applicants Full Name:**

Address:

Telephone Number:

a. *If Applicant is a corporation, provide name and address of Officers*

President's Full Name:

Address:

Telephone Number:

Vice-President's Full Name:

Address:

Telephone Number:

Secretary's Full Name:

Address:

Telephone Number:

Treasurer's Full Name:

Address:

Telephone Number:

b. *Provide name and address of all partners holding 10% or more of the corporation.*

Name:

Address:

Name:

Address:

Name:

Address:

c. *If applicant is other than present owner, provide interest of applicant in property.*

d. *If this application is to be signed by an agent of owner, provide, Agent's Full Name:*

Address:

Telephone Number:

4. *Location of the Property*

Address:

Tax Map Plat Number:

Block Number:

Lot Number:

5. *Description of proposed development.*

6. *General Information.*

Number of proposed lots:

Dwelling type:

Number of dwellings:

7. *Filing Fees.*

Check Number:

Amount:

Check Number:

Amount:

8. *Applications Filed with other Jurisdictions or Public Bodies.*

Name:

Date Filed:

Name:

Date Filed:

Name:

Date Filed:

Name:

Date Filed:

Signature of Applicant(s)

X:

Date:

X:

Date:

Complete all applicable parts of this application. **N/A** those parts that are *Not Applicable*. Instructions for submission of applications are provided with each application. Please use them.

Sign the application.

Return the application to the Board Secretary at;

**619 Salem – Ft. Elfsborg Road
Elsinboro, New Jersey 08079**