

Township of Lawrence
Mercer County NJ
Department of Community Development

Instructions

This package is to be utilized for all applications to either the Planning Board or Zoning Board, with the exception of homeowner's applications (separate package). At the time of the filing of the application, the applicant shall provide one (1) complete set of the following documents for completeness review to the Division of Planning and Redevelopment:

- a) Appropriate documents from the master checklist (application must have an original signature).
- b) Complete set of the Site plans.
- c) Complete set of Architectural plans.
- d) Property Owner's List Request Form. There is a \$10.00 fee for this list, which must be paid at the time of the filing of the application. If there are over forty names, an additional \$0.25 per name will be charged (request form PO-1 attached).
- e) Appropriate fee and escrow (to be determined by the Finance Department at the time of filing of the application). An original W-9 is required with payment.

No application will be accepted without all completed necessary information. The Administrative Officer shall determine the completeness of all applications as specified by the Municipal Land Use Law. A letter of completeness review will be mailed directly to the applicant's attorney advising of any additional information required.

Any questions should be directed to the Administrative Officer at 609.844.7087.

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Land Use Application Master Checklist

Name of Applicant: _____

Block No. _____ **Lot No(s)** _____

- | | |
|------------------------------------------------------------------------------------|-----------------------|
| Required for all applications: | Complete form: |
| <input checked="" type="checkbox"/> General Information | Form G-1 |
| <input checked="" type="checkbox"/> Certifications | Form C-1 |
| <input checked="" type="checkbox"/> Taxpayer Identification number & certification | IRS form W-9 |

- | | |
|-------------------------------------------------------------------------|-----------|
| Type of approval sought (check all as appropriate): | |
| <input type="checkbox"/> Appeal from decision of Administrative Officer | Form A-1 |
| <input checked="" type="checkbox"/> Bulk Variance (parcel) | Form B-1 |
| <input type="checkbox"/> Bulk Variance (signage) | Form B-2 |
| <input type="checkbox"/> Bulk Variance (homeowner) | Form B-3 |
| <input checked="" type="checkbox"/> Contribution Disclosure Statement | Form DS-1 |
| <input type="checkbox"/> Conditional Use | N/A |
| <input type="checkbox"/> Informal | N/A |
| <input type="checkbox"/> Interpretation | N/A |
| <input type="checkbox"/> Lot Consolidation | N/A |
| <input type="checkbox"/> Site Plan, Informal | N/A |
| <input type="checkbox"/> Site Plan, Waiver | N/A |
| <input type="checkbox"/> Site Plan, Minor | N/A |
| <input checked="" type="checkbox"/> Site Plan, Preliminary Major | N/A |
| <input checked="" type="checkbox"/> Site Plan, Final Major | N/A |
| <input checked="" type="checkbox"/> Subdivision, Minor | N/A |
| <input type="checkbox"/> Subdivision, Preliminary Major | N/A |
| <input type="checkbox"/> Subdivision, Final Major | N/A |
| <input type="checkbox"/> Use Variance | Form U-1 |
| <input type="checkbox"/> Other (specify) | N/A |

List all accompanying material:

<u>Description</u>	<u>Number Submitted</u>
_____	_____
_____	_____
_____	_____
_____	_____

List name & address of all expert witnesses expected to testify:

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General Information

1. Applicant:

Name	_____	Phone	_____
Address	_____	Fax	_____
	_____	Email	_____

2. Owner of land (as shown on current tax records):

Name	_____	Phone	_____
Address	_____	Fax	_____
	_____	Email	_____

3. Attorney (where applicable):

Name	_____	Phone	_____
Address	_____	Fax	_____
	_____	Email	_____

4. Engineer (where applicable):

Name	_____	Phone	_____
Address	_____	Fax	_____
	_____	Email	_____

5. If the applicant is a corporation or partnership, list the names and addresses of all stock holders or partners owning a 10% or greater interest in said corporation or partnership in accordance with P.L.1977 Ch.336.

6. Location of Land:

Lot No(s) _____ Block(s) _____ Tax Map Pg(s) _____

Street(s) _____

7. Zoning designation of parcel (see Zoning Map): _____

8. Name of proposed development: _____

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Certifications

Certification of applicant:

I/we do hereby certify that all statements made herein and in any documents submitted herewith are true and accurate.

Applicant's signature *R. Swank* Date _____

(Print or type name)

Owner's consent to filing of application:

If the applicant is not the owner of the property, have owner sign below or file with the application a letter signed by the owner consenting to the application.

I am the current owner of the subject property and am aware of and consent to the filing of this application.

Owner's signature _____ Date _____

(Print or type name)

Acceptance of reasonable review & inspection costs:

I/we do hereby agree to pay all reasonable costs for professional review of the plan(s) and material submitted herewith and for subsequent township inspection of any improvements to be constructed in connection therewith or future bond releases, where such inspection is required.

Applicant's signature _____ Date _____

(Print or type name)

Authorization for township officials to enter upon property:

I/we do hereby grant authorization to township officials, including Planning or Zoning Board members, to enter upon the subject property for the purpose of inspection related to this application.

Owner's signature *R. Swank* Date _____

(Print or type name)

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Bulk Variance (Parcel)

Existing and proposed property dimensions as compared to the zoning ordinance requirements:

	Permitted for zone in which property is located	Permitted for zone where proposed use is allowed ⁽¹⁾	Existing	Proposed	Extent of variance requested
LOT DATA					
Lot Area	SF	SF	SF	SF	SF
Lot Frontage	60 FT	60 FT	N/A FT	25.23 FT	34.77 FT
Lot Width	FT	FT	FT	FT	FT
Lot Depth	FT	FT	FT	FT	FT
Parking Spaces					
Floodplain Buffer (if applicable)	FT	FT	FT	FT	FT
Total Impervious Coverage	%	%	%	%	%
PRINCIPAL BUILDING					
Front Yard setback	FT	FT	FT	FT	FT
Left Side Yard setback	FT	FT	FT	FT	FT
Right Side Yard setback	FT	FT	FT	FT	FT
Rear Yard setback	35 FT	35 FT	>35 FT	34.2(12.01) FT	0.8' FT
Floor Area Ratio					
Building Height	FT	FT	FT	FT	FT
ACCESSORY BUILDING					
Side Yard setback	FT	FT	FT	FT	FT
Rear Yard setback	FT	FT	FT	FT	FT
Dist. to Other Building	FT	FT	FT	FT	FT

(1) Complete this column with a Use Variance application only

Mark any pre-existing variance with an “ * ”.