BOROUGH OF HARRINGTON PARK

(PLANNING BOARD)

APPLICATION FOR PRELIMINARY MAJOR SUBDIVISION APPROVAL

1. APPLICANT'S NAME: _____

   ADDRESS: _____

   _____

   TELEPHONE:_____ FAX:_____

   E-MAIL: _____

2. APPLICANT'S ATTORNEY: _____

   ADDRESS: _____

   _____

   TELEPHONE: _____ FAX: _____

   E-MAIL:_____

   (ANY CORPORATION OR LIMITED LIABILITY COMPANY MUST BE REPRESENTED BY AN ATTORNEY LICENSED TO PRACTICE IN THE STATE OF NEW JERSEY)

3. INTEREST OF APPLICANT (IF OTHER THAN OWNER):

   _____ CONTRACT PURCHASER
   _____ TENANT
   _____ OTHER (SPECIFY) _____

   (IF OTHER THAN OWNER, ATTACH CONSENT OF OWNER AND COPY OF CONTRACT OF SALE, LEASE, OR OTHER DOCUMENT AUTHORIZING APPLICATION)

4. DISCLOSURE SATEMENT:

   PURSUANT TO N.J.S. 40:55D-48.1, THE NAMES AND ADDRESSES OF ALL PERSONS OWNING 10% OF THE STOCK IN A CORPORATE APPLICANT, OR 10% INTEREST IN A PARTNERSHIP OR LIMITED LIABILITY COMPANY MUST BE DISCLOSED. IN ACCORDANCE WITH N.J.S. 40:55D-48.2 THAT DISCLOSURE REQUIREMENT APPLIES TO ANY CORPORATION, PARTNERSHIP OR LIMITED LIABILITY COMPANY WHICH OWNS MORE THAN 10% INTEREST IN THE APPLICANT FOLLOWED UP THE CHAIN OF OWNERSHIP UNTIL THE NAMES AND ADDRESSES OF THE NON-CORPORATE STOCKHOLDERS AND PARTNERS EXCEEDING THE 10% OWNERSHIP CRITERION HAVE BEEN DISCLOSED.

   NAME_____ ADDRESS_____ INTEREST _____
   NAME_____ ADDRESS_____ INTEREST _____
   NAME_____ ADDRESS_____ INTEREST _____
   (ATTACH ADDITIONAL SHEETS IF NECESSARY)

5. PRESENT OWNER (IF OTHER THAN APPLICANT):_____

   ADDRESS: _____

   _____

   TELEPHONE: _____

6. LOCATION OF SUBDIVISION: BLOCK:_____ LOT: _____

   STREET ADDRESS: _____

7. NUMBER OF PROPOSED LOTS:_____

8. ZONING DATA: ZONING DISTRICT:_____

BULK REQUIREMENT	EXISTING	REQUIRED	PROPOSED (EACH LOT)
LOT AREA			
LOT WIDTH			
LOT FRONTAGE			
FRONT YARD SETBACK			
REAR YARD SETBACK			
BUILDING COVERAGE			
LOT COVERAGE			
SIDE YARD SETBACK(S)			
BUILDING HEIGHT			

9. DEVELOPMENT PLANS:

A. SELL LOTS ONLY? (YES OR NO) _____
B. CONSTRUCT HOUSE(S) FOR SALE? _____
C. OTHER: _____

10. DOES THE SUBDIVISION REQUIRE:
A. EXTENSION OF STREETS? _____
B. EXTENSION OF SIDEWALKS? _____
C. EXTENSION OF CURBS? _____
D. EXTENSION, OR CONSTRUCITON, OF DRAINAGE FACILITIES? _____
E. EXTENSION OF WATER FACILITIES? _____
F. EXTENSION OF SEWER FACILITIES? _____
G. EXTENSION OF OTHER UTILITIES? _____ SPECIFY_____
_____

11. IF THIS APPLICATION INCLUDES REQUESTS FOR VARIANCES, EXCEPTIONS OR WAIVERS FROM THE HARRINGTON PARK ZONING ORDINANCE, PLEASE SPECIFY SECTION OF ORDINANCE, TYPE OF RELIEF REQUESTED AND BASIS FOR THE RELIEF REQUESTED.

_____
_____
_____
_____
_____

12. DOES THE APPLICANT OWN OR HAVE A BENEFICIAL INTEREST IN ANY LAND ADJOINING THE LAND FOR WHICH THE APPLICATION IS MADE?

YES_____ NO _____

IF YES, PLEASE PROVIDE: BLOCK _____ LOT _____
ADDRESS: _____

13. HAVE ANY PREVIOUS APPLICATIONS INVOLVING THE SUBJECT PROPERTY BEEN MADE TO THE PLANNING BOARD OR BOARD OF ADJUSTMENT?

YES _____ NO _____ IF YES, STATE:

A. NAME OF APPLICANT: _____
B. DATE OF APPLICATION: _____
C. NATURE OF APPLICATION: _____
D. RESULT OF APPLICATION: _____

14. ARE THERE ANY DEED RESTRICTIONS OR COVENANTS WHICH AFFECT THE SUBJECT PROPERTY?

YES _____ NO _____

IF YES, ATTACH COPIES OF ALL SUCH DOCUMENTS.

15. NAME OF ENGINEER PREPARING PLANS: _____
ADDRESS: _____
TELEPHONE: _____ FAX: _____
DATE OF PLANS: _____ REVISION DATES: _____
EMAIL:_____

16. NAME OF LICENSED LAND SURVEYOR: _____
SURVEY: _____
ADDRESS: _____
TELEPHONE: _____ FAX: _____
DATE OF SURVEY: _____ REVISION DATES: _____
EMAIL:_____

17. NAME OF LICENSED LANDSCAPE ARCHITECT:
_____
ADDRESS: _____
TELEPHONE: _____ FAX: _____
DATE OF PLAN: _____ REVISION DATES: _____
EMAIL:_____

18. OTHER PROFESSIONAL PREPARING PLANS: _____
ADDRESS: _____
TELEPHONE: _____ FAX: _____
DATE OF PLANS: _____ REVISION DATES: _____
EMAIL:_____

19. APPLICATION FEES SUBMITTED: $ _____ESCROWS SUBMITTED: $_____

I certify under penalty of perjury that the foregoing statements and the materials submitted are true. I further certify that I am the individual applicant or that I am an authorized officer of the corporate applicant or authorized member of the limited liability company applicant or that I am a general partner of the partnership applicant.

SIGNATURE OF APPLICANT

_____
Name:
Title:

DATE:_____

I certify under penalty of perjury that I am the Owner of the property which is the subject matter of this application, that I have authorized the applicant to make this application and that I agree to be bound by the application, the representations made and the decision in the same manner as if I were the applicant. Further, the members of the Board, the Board professionals, and associated Borough officials have permission to enter the property for the limited purpose of inspecting the same for this application.

SIGNATURE OF OWNER

_____

Name:

DATE: _____ Title:

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