

SITE PLAN

Application # SP

Kathleen A. Donovan
County Executive



COUNTY OF BERGEN
Department of Planning & Economic Development
One Bergen County Plaza, Hackensack N.J. 07601-7000 (201) 336-6446

APPLICATION FOR SITE PLAN APPROVAL

The undersigned hereby applies for approval of the accompanying site development plan. Four (4) copies of this Application accompanied by the Initial Investigation Fee and four (4) copies of the plan conforming to the minimum requirements as outlined in Section III, Site Plan Details, of the County of Bergen Site Plan Review Resolution. Permission is given to walk the property for review purposes. We acknowledge that the reporting period set forth in N.J.S.A. 40:27-6.7 shall not begin to run until this application and accompanying plans are **COMPLETE IN ALL RESPECTS**. We acknowledge and agree that if this application is not completed within one year of the date of filing, it will be subject to administrative dismissal without prejudice. The copies of the plan submitted for review should be FOLDED, not rolled.

(1) Municipality _____ (2)**Signature of Applicant/Agent _____

(3) Project Name: _____ (4) Full Project Description: _____

(5) Location (Street address & nearest intersecting street)

(6) County Facilities Affected

(7) Block(s) _____ (8) Lot(s) _____ (9) Plot Area (ACRES) _____

(10) Proposed Use _____ (11) if residential indicate number of Dwelling Units _____

(12) Number of Parking Spaces	Existing	New	Total
(13) Tot. Area of Bldg. (All Floors)	Existing	Sq. Ft. New	Sq. Ft. Total
(14) Impervious Area	Existing	Sq. Ft. New	Sq. Ft. Total

(15) This plan has also been filed with the following municipal agencies:

Planning Bd. (Date)	Bd. Of Adjustment (Date)	Const. Official (Date)	Status
Name, Address and Telephone Number of			
(16) Applicant			
(17) Attorney			
(18) Property Owner			
(19) Plan Preparer			
(20) Contract Purchaser			

Name, Address and Telephone Number of

(16) Applicant

(17) Attorney

(18) Property Owner

(19) Plan Preparer

(20) Contract Purchaser

**** ALL FIELDS MUST BE FILLED OUT – INCOMPLETE FORMS WILL BE RETURNED**

PLEASE SEE FEE SCHEDULE FOR FEES

<u>FOR OFFICIAL USE ONLY</u>		RECEIVED	
Application/Fee	Reproducible Plan	Processing Fee	Deed
Performance Guarantee	Soil	Other	Date:
Approved Plan Received by:		(Signature)	
(Please print)			