



BOROUGH OF TINTON FALLS PLANNING BOARD

APPLICATION FOR DEVELOPMENT

Robert Clayton

Chairman

Michael MacFarlane, P.E., T&M Associates

Board Engineer

Jennifer Beahm, P.P., AICP, Leon S. Avakian, Inc.

Board Planner

Collins, Vella, & Casello, LLC

Board Attorney

Trish Zibrin

Board Secretary

Borough of Tinton Falls

556 Tinton Avenue

Tinton Falls, NJ 07724

(732) 542-3400 ext. 215

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www.tintonfalls.com

APPLICATION FOR DEVELOPMENT

FOR OFFICIAL USE ONLY:	
APPLICATION #: _____	DATE SUBMITTED: _____

DEVELOPMENT INFORMATION

DEVELOPMENT NAME			
ADDRESS OF SUBJECT PROPERTY			
BLOCK (S)		LOT (S)	
<input type="checkbox"/> MINOR SUBDIVISION <input type="checkbox"/> MAJOR SUBDIVISION <input type="checkbox"/> PRELIMINARY <input type="checkbox"/> FINAL <input type="checkbox"/> INFORMAL <input type="checkbox"/> MINOR SITE PLAN <input type="checkbox"/> MAJOR SITE PLAN <input type="checkbox"/> PRELIMINARY <input type="checkbox"/> FINAL <input type="checkbox"/> INFORMAL			

APPLICANT INFORMATION

NAME OF APPLICANT			
ADDRESS			
PHONE		EMAIL	
SIGNATURE OF APPLICANT			

ENGINEER INFORMATION

NAME OF ENGINEER			
ADDRESS			
PHONE		EMAIL	

ATTORNEY INFORMATION

NAME OF ATTORNEY			
ADDRESS			
PHONE		EMAIL	

ARCHITECT INFORMATION

NAME OF ARCHITECT			
ADDRESS			
PHONE		EMAIL	

PLANNER INFORMATION

NAME OF PLANNER			
ADDRESS			
PHONE		EMAIL	

OTHER PROFESSIONALS

NAME			
ADDRESS			
PHONE		EMAIL	

STATEMENT OF LANDOWNER WHERE APPLICANT IS NOT LANDOWNER

I, _____, OWNER OF BLOCK (S) _____ LOT(S) _____ HEREBY ACKNOWLEDGE THAT THE ABOVE APPLICATION IS MADE WITH MY COMPLETE UNDERSTANDING AND PERMISSION

LANDOWNER SIGNATURE: <i>(sign in presence of notary)</i>		DATE:	
PRINT LANDOWNER NAME:			

SWORN & SUBSCRIBED to before me this
_____ day of _____ 20 _____

_____(notary)

PROPOSED DEVELOPMENT

ZONE DISTRICT:	TOTAL AREA OF TRACT:
EXISTING COVENANTS/DEED RESTRICTIONS ON PROPERTY?	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> UNKNOWN
PROPOSED COVENANTS/DEED RESTRICTIONS ON PROPERTY?	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> UNKNOWN
AFFORDABLE HOUSING COMPONENT PROPOSED?	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> UNKNOWN
SUBMITTED APPLICATION FOR WETLANDS LOI TO NJDEP?	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> UNKNOWN
IS OUTDOOR STORAGE PROPOSED? <i>(If YES, list material to be stored on next page)</i>	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> UNKNOWN

MINIMUM/MAXIMUM	REQUIRED	PROPOSED	VARIANCE REQUIRED
MIN. LOT AREA	_____ SF	_____ SF	<input type="checkbox"/> YES <input type="checkbox"/> NO
MIN. LOT WIDTH	_____ FT	_____ FT	<input type="checkbox"/> YES <input type="checkbox"/> NO
MIN. LOT DEPTH	_____ FT	_____ FT	<input type="checkbox"/> YES <input type="checkbox"/> NO
MIN. FRONT YARD	_____ FT	_____ FT	<input type="checkbox"/> YES <input type="checkbox"/> NO
MIN. SIDE YARD	_____ FT	_____ FT	<input type="checkbox"/> YES <input type="checkbox"/> NO
MIN. REAR YARD	_____ FT	_____ FT	<input type="checkbox"/> YES <input type="checkbox"/> NO
MAX. BLDG. HEIGHT	_____ FT	_____ FT	<input type="checkbox"/> YES <input type="checkbox"/> NO
MAX. BLDG. COVERAGE	_____ %	_____ %	<input type="checkbox"/> YES <input type="checkbox"/> NO
MAX. LOT COVERAGE	_____ %	_____ %	<input type="checkbox"/> YES <input type="checkbox"/> NO
MAX. FLOOR AREA RATIO	_____	_____	<input type="checkbox"/> YES <input type="checkbox"/> NO
MIN. OFF STREET PARKING	_____	_____	<input type="checkbox"/> YES <input type="checkbox"/> NO
MIN. OFF STREET LOADING	_____	_____	<input type="checkbox"/> YES <input type="checkbox"/> NO

RESIDENTIAL
TOTAL ACREAGE OF TRACT RESIDENTIAL _____
NUMBER OF DWELLING UNITS _____

NON-RESIDENTIAL
TOTAL ACREAGE OF TRACT NON-RESIDENTIAL _____
GROSS FLOOR AREA _____

PROJECT DESCRIPTION

BRIEFLY DESCRIBE THE NATURE OF THE APPLICATION AND THE CHANGES PROPOSED. PLEASE INCLUDE INTENDED USE, PROSPECTIVE TENANTS, AND ANY MATERIALS TO BE STORED ON SITE.

BOARD MEMBERS MAY ELECT TO VISIT THE PROPERTY IN QUESTION. PLEASE DESCRIBE ANY SAFETY CONCERNS OR DANGEROUS CONDITIONS THAT MAY PROHIBIT THEM FROM DOING SO.



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ESCROW AGREEMENT

Please complete the following information:

APPLICANT INFORMATION			
NAME OF APPLICANT			
APPLICATION NUMBER			
BLOCK		LOT	

I understand that the sum of \$ _____ has been deposited in an escrow account. In accordance with the Ordinances of the Borough of Tinton Falls, I further understand that the escrow account is established to cover the cost of the professional services including engineering, planning, legal, and other expenses associated with the review of submitted materials and the publication of the decision by the Board under the provisions of N.J.S.A 40:55D-1 et seq. 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 required additional amount and shall add that sum to the escrow account within fifteen (15) days.

Signature Date

Print Full Name Title



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OWNERSHIP DISCLOSURE AFFIDAVIT

Please complete the following information. Notary is required

APPLICANT INFORMATION			
NAME OF APPLICANT			
APPLICATION NUMBER			
BLOCK		LOT	
OWNERSHIP TYPE	<input type="checkbox"/> INDIVIDUAL	<input type="checkbox"/> CORPORATION	<input type="checkbox"/> PARTNERSHIP

The owner and/or Applicant are under a continuing obligation to update this Affidavit immediately upon change of ownership or ownership interest.

Pursuant to N.J.S.A. 40:55D-48.1, the names and addresses of all persons owning ten percent (10%) or more of the stock in a corporate applicant or ten percent (10%) or more interest in any partnership applicant must be disclosed. In accordance with N.J.S.A. 40:55D-48.2, that disclosure requirement applies to any corporation or partnership which owns more than ten percent (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 ten (10%) ownership criterion have been disclosed

NAME	ADDRESS	INTEREST

SWORN & SUBSCRIBED to before me this

_____ day of _____ 20 _____

_____ (notary)

Signature (Officer/Partner)

Date

Print Full Name

Title



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CONTRIBUTION DISCLOSURE STATEMENT

BOROUGH OF TINTON FALLS, MONMOUTH COUNTY, NEW JERSEY
PURSUANT TO BOROUGH ORDINANCE NO. 05-1153

The undersigned, being a duly authorized representative and/or individual authorized to execute this sworn statement on behalf of the below-named individual or entity under the penalty of perjury, affirms that:

1. I have read and understood the provisions contained in Tinton Falls Ordinance No. 05-1153, codified as Borough ordinance Section 40-10 regarding the disclosures required of Applicants, Property Owners, Developers, and or/ Professionals who apply for or provide testimony, plans or reports in support of any application for variance and/or waiver requested of the Board and who have an enforceable proprietary interest in the property or development which is the subject of the application or whose fee in whole or part is contingent upon the outcome of the application.
2. I am (check appropriate) APPLICANT, PROPERTY OWNER, DEVELOPER, OR PROFESSIONAL as defined under that Ordinance and affirmatively state that I or the entity for which I execute this Certification has not violated any of the terms of that Ordinance prohibiting a contribution that is defined in the Ordinance to or on behalf of any candidate, candidate committee, joint candidate committee, political committee, continuing political committee or political party committee or made any pledge, promise or other commitment of assumption of liability to make such transfer in violation of the limits on contributions as noted therein.
3. In addition, I understand that during the pendency of the application process before the Board, I will continue to comply with the prohibitions contained in this Ordinance and shall amend this Contribution Disclosure Statement to include continuing disclosure of all contributions within the scope of the disclosure requirements set forth in the Ordinance.
4. I have read the penalty provisions contained in Section 40-10 and understand and agree to abide by the terms and conditions of said Ordinance for the periods contained therein.

SWORN & SUBSCRIBED to before me this

_____ day of _____ 20 _____

Property Owner/Applicant/Professional

(notary)

Authorized Representative