

Application # \_\_\_\_\_

## **FRANKFORD LAND USE BOARD**

### **UNIVERSAL APPLICATION FORM – CONCEPT APPLICATION**

**NOTICE:** Frankford Township has combined its Zoning and Planning Boards' into a combined Board known, as the Land Use Board. This is the only form to be used for all applications for development and other matters before the Land Use Board.

#### **APPLICANT – SUPPLY WITH SUBMISSION**

- ( ) **17 NUMBER OF PLATS** (folded)
- ( ) **PROPOSED FORM OF NOTICE** (if applicable)
- ( ) **CERTIFICATION OF CURRENT TAX STATUS**
- ( ) **AFFIDAVIT OF OWNERSHIP** (if applicable)
- ( ) **CORPORATE DISCLOSURE STATEMENT** (if applicable)
- ( ) **LIST OF PROPERTY OWNERS WITHIN 200 FEET**
- ( ) **APPROPRIATE CHECKLIST**
- ( ) **FOUR (4) PHOTOGRAPHS OF CURRENT CONDITIONS**

**IF APPLICATION IS MADE FOR MULTIPLE RELIEF OR APPROVALS (i.e. "D" Variance and Site Plan) THEN APPLICANTS MUST SUPPLY ALL FORMS AND CHECKLISTS FOR ALL REQUESTED RELIEF OR APPROVAL.**

**DATE SUBMITTED:** \_\_\_\_\_

#### **TYPE OF APPLICATION: (check all that apply)**

- ( ) MINOR SUBDIVISION
  - ( ) PRELIMINARY MAJOR SUBDIVISION
  - ( ) MINOR SITE PLAN (See checklist for filing requirements)
  - ( ) FINAL MAJOR SUBDIVISION
  - ( ) PRELIMINARY MAJOR SITE PLAN
  - ( ) FINAL MAJOR SITE PLAN
  - ( ) "C" VARIANCE
  - ( ) "D" VARIANCE
  - ( ) APPEAL
  - ( ) INTERPRETATION
  - ( ) OTHER (INFORMAL, PLANNING VARIANCE, NONCONFORMANCE CERTIFICATE, EXTENSION OF APPROVAL, ETC.)
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I. PROJECT NAME: \_\_\_\_\_

II. APPLICANT'S NAME, ADDRESS AND INTEREST: \_\_\_\_\_

TELEPHONE: \_\_\_\_\_ FAX: \_\_\_\_\_

III. PROPERTY'S STREET ADDRESS: \_\_\_\_\_

BLOCK(S): \_\_\_\_\_ LOT(S): \_\_\_\_\_

ZONE: \_\_\_\_\_ TAX MAP SHEET #: \_\_\_\_\_

SIZE OF PROPERTY (in acres): \_\_\_\_\_

PRESENT USE OF PREMISES: \_\_\_\_\_

PROPOSED USE OF PREMISES: \_\_\_\_\_

**IV. PRIOR ACTIVITY**

CHECK ONE: This property ( ) has or ( ) has not been the subject of prior applications.

Previous Application No.: \_\_\_\_\_ Previous Date: \_\_\_\_\_

Action Taken: \_\_\_\_\_

ATTACH COPIES OF PRIOR RESOLUTIONS: \_\_\_\_\_

V. NAME AND ADDRESS OF PROPERTY OWNER: \_\_\_\_\_

TELEPHONE: \_\_\_\_\_

**VI. ALL CORPORATE OR PARTNERSHIP APPLICANTS:** All corporations or partnerships applying to the Land Use Board for a variance to construct a multiple dwelling of 25 or more family, for approval to subdivide a parcel into 6 or more lots, or for approval for a site to be used for commercial purposes, shall supply the names and addresses of all stockholders or individual partners owning at least 10% of stock of any class or at least 10% of the interest of the partnership. Applicants shall use the form supplied by the Land Use Administrator. Failure to comply will delay the hearing of the application.

**CORPORATE DISCLOSURE STATEMENT**

Pursuant to the Municipal Land Use Law, N.J.S.A. 40:55D-1 et. seq., corporations or partnerships must list the names and addresses of all stockholders owning at least 10% of stock of any class or those owning at least 10% or more of the interest in the partnership.

NAME

ADDRESS

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**APPLICANT'S PROFESSIONALS**

- **APPLICANT'S ATTORNEY OR REPRESENTATIVE:** \_\_\_\_\_  
FIRM: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
TELEPHONE: \_\_\_\_\_ FAX: \_\_\_\_\_
  
- **APPLICANT'S SURVEYOR:** \_\_\_\_\_  
PLATS PREPARED BY: \_\_\_\_\_  
FIRM: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
TELEPHONE: \_\_\_\_\_ FAX: \_\_\_\_\_
  
- **APPLICANT'S ENGINEER:** \_\_\_\_\_  
PLATS PREPARED BY: \_\_\_\_\_  
FIRM: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
TELEPHONE: \_\_\_\_\_ FAX: \_\_\_\_\_
  
- **APPLICANT'S ARCHITECT:** \_\_\_\_\_  
PLATS PREPARED BY: \_\_\_\_\_  
FIRM: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
TELEPHONE: \_\_\_\_\_ FAX: \_\_\_\_\_
  
- **APPLICANT'S PLANNER:** \_\_\_\_\_  
PLATS PREPARED BY: \_\_\_\_\_  
FIRM: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
TELEPHONE: \_\_\_\_\_ FAX: \_\_\_\_\_
  
- **OTHER PROFESSIONALS:** \_\_\_\_\_  
FIRM: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
TELEPHONE: \_\_\_\_\_ FAX: \_\_\_\_\_

IF THE APPLICATION IS BEING MADE BY ANYONE OTHER THAN THE PROPERTY OWNER, THE PROPERTY OWNER MUST SIGN THE BELOW AUTHORIZATION FORM BEFORE A NOTARY.

**AFFIDAVIT OF OWNERSHIP, AUTHORIZATION AND SITE INSPECTION**

STATE OF \_\_\_\_\_

SS:

COUNTY OF \_\_\_\_\_

The undersigned, of full age, being duly sworn according to law deposes and says that I reside at \_\_\_\_\_, in the \_\_\_\_\_, County of \_\_\_\_\_ and State of \_\_\_\_\_, and that I am the owner in fee of the lands and premises which are the subject of this application to the Frankford Land Use Board and the property as described in that application as Block \_\_\_\_\_, Lot \_\_\_\_\_, on \_\_\_\_\_, Township of Frankford, County of Sussex and State of New Jersey. As owner, I have read this application and the applicant is authorized to proceed. I understand that a site inspection by Land Use Board members and Board or Township Professionals may be required and by signing this authorization I am consenting to any site inspection that may be necessary.

\_\_\_\_\_

Date: \_\_\_\_\_

Sworn to and subscribed before me this:

\_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_

NOTARY PUBLIC

**NOTICE TO ALL APPLICANTS – ATTACH AN EXPLANATORY STATEMENT CONTAINING OTHER PROPOSALS, LEGAL POSITIONS, WAIVERS REQUESTED OR OTHER INFORMATION THAT WOULD ASSIST THE BOARD IN MAKING A DETERMINATION AS TO THE MERITS OF YOUR APPLICATION.**

**ESCROW STATEMENT AND APPLICANT’S CERTIFICATION**

As applicant, I understand that monies associated with this application have been deposited in an escrow account (Builder’s Trust Account). In accordance with the Township of Frankford Ordinances, I further understand that the escrow account is established to cover the cost of professional services including engineering, planning, legal and other expenses associated with the review of the submitted materials, any communications with the Board’s or Township’s Professionals as chargeable time, and the publication of the decision by the Frankford Land Use Board. Sums not expended in the review process will be refunded. If additional sums are necessary, I understand that I will be notified of any required additional amount and shall replenish the escrow account within 20 days of notification.

Further, I certify that the foregoing statements and materials submitted are true. I further certify that I am the individual applicant or that I am an Officer/General Partner/Managing Member of the Corporation/General Partnership/L.L.C. making application and that I am authorized to sign the application for the Corporation/General Partnership.

DATE: \_\_\_\_\_ SIGNATURE OF APPLICANT/ATTORNEY \_\_\_\_\_

Sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

\_\_\_\_\_  
NOTARY PUBLIC