

## TOWNSHIP OF MEDFORD

### LAND DEVELOPMENT APPLICATION

If you are not familiar with the Medford Township Ordinance requirements, please ask to see a member of the Planning staff prior to filling out this application.

**A. BASIC INFORMATION**

1.

A P P L I C A N T	Name
	Street Address
	City <span style="float: right;">State      Zip Code</span>
	Home phone <span style="float: right;">Circle one: listed/unlisted</span>
	Daytime phone <span style="float: right;">Circle one: listed/unlisted</span>

2.

O W N E R	Name
	Street Address
	City <span style="float: right;">State      Zip Code</span>
	Home phone <span style="float: right;">Circle one: listed/unlisted</span>
	Daytime phone <span style="float: right;">Circle one: listed/unlisted</span>

3. If applicant is not the owner, set forth in detail the nature and source of the legal beneficial right by which you claim to submit this application.

4. TYPE OF APPLICATION: (check as many items as applicable)

Asterisk (\*) applications require a public hearing with notice and legal advertisement.

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> Minor subdivision*     | <input type="checkbox"/> Major Site Plan-Final                               | <input type="checkbox"/> Interpret Zoning Map or Ord.* |
| <input type="checkbox"/> Major Sub.-Prel.*      | <input type="checkbox"/> Conditional Use*                                    | <input type="checkbox"/> Design Waiver*                |
| <input type="checkbox"/> Major Sub.-Final       | <input type="checkbox"/> Historic Village Review                             | <input type="checkbox"/> Bulk Variance*                |
| <input type="checkbox"/> Exempt Subdivision     | <input type="checkbox"/> Single Lot Review                                   | <input type="checkbox"/> Use Variance*                 |
| <input type="checkbox"/> Minor Site Plan*       | <input type="checkbox"/> Appeal of Decision of an<br>Administrative Officer* | <input type="checkbox"/> Informal Review               |
| <input type="checkbox"/> Major Site Plan-Prel.* | <input type="checkbox"/> Submission Waivers*                                 | <input type="checkbox"/> Satellite Dish                |
|   |  | <input type="checkbox"/> Waiver of Site Plan           |

NOTE: If a variance is requested in conjunction with this application, the exact nature of the variance must be indicated on the application form - see No. 14.

5. LIST OF INDIVIDUALS WHO PREPARED PLANS:

A R C H I T E C T	Name
	Street Address
	City <span style="float: right;">State      Zip Code</span>
	Phone
	Fax

P L A N N E R	Name
	Street Address
	City <span style="float: right;">State      Zip Code</span>
	Phone
	Fax

E N G I N E E R	Name
	Street Address
	City <span style="float: right;">State      Zip Code</span>
	Phone
	Fax

A T T O R N E Y	Name
	Street Address
	City <span style="float: right;">State      Zip Code</span>
	Phone
	Fax

**B. SITE INFORMATION**

6. LOCATION OF PROPERTY

Street Address	
Block no.	Lot no.

B. Site Information continued

7. TYPE OF ROAD FRONTAGE: \_\_\_\_\_ Route 70 \_\_\_\_\_ Collector \_\_\_\_\_ Secondary Local Road  
 \_\_\_\_\_ Arterial \_\_\_\_\_ Primary Local Road

8. ZONE DISTRICTS: (circle one)

GMN Growth Management Area North	RS-2 Rural Suburban-2	HC-1 Highway Commercial Zone-1	HVR Historic Village Residential
GMS Growth Management Area South	AR Agricultural Retention	HC-2 Highway Commercial Zone-2	VRD Village Residential Development
GD Growth District	FD Forest District	HM Highway Management	RHO Residential Home Occupation
RGD-1 Reserve Growth District-1	PD Preservation District	RC Restricted Commercial	APA Agricultural Production Area
RGD-2 Reserve Growth District-2	PPE Park/Public/Education	CC Community Commercial	SAPA Special Agricultural
RS-1 Rural Suburban-1	HVC Historic Village Commercial	PI Planned Industrial	Production Area

9. DESCRIPTION OF PROPOSED USE

Present Use: \_\_\_\_\_  
 Proposed Use: \_\_\_\_\_  
 Number of lots: \_\_\_\_\_

Lot Size	Frontage	Square Feet	Acres
Required	_____	_____	_____
Existing	_____	_____	_____
Proposed	_____	_____	_____

Primary Building Setback Requirements

	Wetlands/Buffer	Front	One Side	Second Side	Rear
Required	_____	_____	_____	_____	_____
Existing	_____	_____	_____	_____	_____
Proposed	_____	_____	_____	_____	_____

Accessory Building Setback Requirements

	Wetlands/Buffer	Side	Rear	Distance to other bldgs.	No. of Parking Spaces and loading	Off street	Loading
Required	_____	_____	_____	_____	Required _____	_____	_____
Existing	_____	_____	_____	_____	Existing _____	_____	_____
Proposed	_____	_____	_____	_____	Proposed _____	_____	_____

Percentage of Building and Total Lot Coverage

	% Bldg. Cover	Gross Floor Area	% Lot Coverage	Gross Floor Area	Height
Allowed	_____	_____	_____	_____	_____
Existing	_____	_____	_____	_____	_____
Proposed	_____	_____	_____	_____	_____

10. UTILITIES: Public Water

Yes	No		Well	Yes	No	
_____	_____	Will this proposal require new water supply?	_____	_____	_____	Is there an existing well?
_____	_____	Is there an existing municipal water connection?	_____	_____	_____	Can the existing well service this proposal?
_____	_____	Can an existing connection service this proposal?	_____	_____	_____	Is a new well proposed?
_____	_____	Are additional connections required?	_____	_____	_____	Has application been made?
_____	_____	Is the municipal water supply available?	_____	_____	_____	Has application been approved or denied?
_____	_____	Has application been made for municipal connections?	_____	_____	_____	Date _____
_____	_____	Has application been approved or denied?	_____	_____	_____	
_____	_____	Date _____ No. on connections _____	_____	_____	_____	

On Site Sewerage Treatment

Yes	No		Yes	No	
_____	_____	Will this proposal require new sewerage lines?	_____	_____	Is there an existing septic system?
_____	_____	Is there an existing Municipal sewer connection?	_____	_____	Can the existing system service this proposal?
_____	_____	Can the existing connection service this proposal?	_____	_____	Is a new system proposed?
_____	_____	Are additional sewer connections required?	_____	_____	Type: _____ conventional septic
_____	_____	Is sewer capacity available?	_____	_____	_____ alternative design
_____	_____	Has the application been made for municipal connection?	_____	_____	_____ Waterless toilet w/ gray water
_____	_____	Has the application been approved or denied?	_____	_____	_____ other-describe _____
_____	_____	Date _____ No. of connections _____	_____	_____	Has application been made for on site treatment?
_____	_____		_____	_____	Has the application been approved or denied?
_____	_____		_____	_____	Date _____

Gas Natural Gas: \_\_\_\_\_ Existing \_\_\_\_\_ Proposed  
 Propane: \_\_\_\_\_ Existing \_\_\_\_\_ Proposed

Electric \_\_\_\_\_ Existing \_\_\_\_\_ Above ground  
 \_\_\_\_\_ Proposed \_\_\_\_\_ Below ground



**E. CERTIFICATION AND SIGNATURE**

**18. AFFIDAVIT OF APPLICANT:**

State of New Jersey

County of \_\_\_\_\_

\_\_\_\_\_ of full age, being duly sworn according to law, on oath deposes and says, that all of the above statements and the papers submitted herewith are true.

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

\_\_\_\_\_  
Applicant to Sign Here

\_\_\_\_\_  
Print or Type Name

**19. AFFIDAVIT OF OWNERSHIP**

State of New Jersey

County of \_\_\_\_\_

\_\_\_\_\_ of full age, being duly sworn according to law, on oath deposes and says, that the deponent resides at \_\_\_\_\_ in the \_\_\_\_\_ of \_\_\_\_\_ in the County of \_\_\_\_\_ and the State of \_\_\_\_\_ that, \_\_\_\_\_ is the owner of all that certain lot, piece of land situated, lying, and being in the municipality aforesaid, and known and designed as number \_\_\_\_\_.

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

\_\_\_\_\_  
Owner to Sign Here

\_\_\_\_\_  
Print or Type Name

**20. AUTHORIZATION BY OWNER:** (if anyone other than above owner is making this application, the following authorization must be executed)

To the Approving Board of the Township of Medford:

\_\_\_\_\_ is hereby authorized to make the within application.

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

\_\_\_\_\_  
Owner to Sign Here

\_\_\_\_\_  
Print or Type Name

**CERTIFICATION**

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

I, \_\_\_\_\_ an authorized representative of \_\_\_\_\_ which is a corporation, or partnership, applying to the Planning Board or Zoning Board of Adjustment of the Township of Medford for permission to subdivide a parcel of land into six (6) or more lots, applying for a variance to construct a multiple dwelling of twenty-five (25) or more family units, or for the approval of a site to be used for commercial purposes, do hereby disclose, pursuant to the requirements of NJSA 40:55D-48.1, the name and addresses of all stockholders or individual partners owning at least 10% of the stock of the corporation, of at least 10% of the interest in the partnership which are hereby listed as follows:

Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(If any of the above owners is a corporation or partnership, the applicant is required to disclose the names and address of each individual holding a 10% interest, or greater, in the named corporation or partnership which shall be divulged in the same format as the above pursuant to NJSA 40:55D-48.2)