

APPLICATION FOR DEVELOPMENT

**PLANNING BOARD
TOWNSHIP OF WEST CALDWELL
ESSEX COUNTY, NEW JERSEY**

<p>Do not write in this space.</p> <p>Application No. _____</p> <p>Submission Date: _____</p> <p>Fee: _____</p>

1. Site address or reference: _____
2. Block(s): _____ Lot(s): _____ Zone District: _____
3. Lot Area (sq. ft.): _____ Building Floor Area (sq. ft.): _____
4. Applicant: Name: _____ Phone: _____
 Address: _____ Zip: _____
 Business Name: _____
5. Property Owner: Name: _____
 Address: _____ Zip: _____
6. Basic nature of intended structure and/or use: _____

7. Specify the nature and extent of any variances and/or exceptions Applicant is seeking:

8. Does this application apply to a new _____ or existing _____ Site Plan?
Note: If approved Site Plan exists, any changes will require submission of a revised Site Plan.
9. Is any portion of the property located in a Flood Hazard Area? _____
10. Complete page 2 on reverse side for all commercial, industrial and business applications.

Applicant: Signature _____ Date _____

Property Owner: Signature _____ Date _____

Property owners shall be bound by and responsible for all terms and conditions of any Planning Board approval granted as a result of this application and shall be subject to the principal of res judicata in the event that the application is denied.

Corporations or partnerships shall attach hereto a stockholder/partner listing if required by N.J.S.A.40:55D-48.1.

**SUPPLEMENTARY INFORMATION REQUIRED ONLY
FOR COMMERCIAL, INDUSTRIAL & BUSINESS APPLICATIONS**

1. Name & address of attorney who will handle this application, if any: _____
2. Are your real estate taxes current? _____ Number of Employees: _____
3. Specify working hours and days: _____
4. Parking requirements for employees: _____ ; for visitors _____
5. State location of any outside storage: _____
6. Loading/unloading locations: _____
7. Inbound/Outbound deliveries: _____
8. Location of any overnight vehicle storage: _____
9. Type and location of any outside lighting: _____
10. Storage of combustibles? _____ If any, state type & amount: _____
11. Disposal method of garbage/trash: _____
12. Disposal method of industrial wastes: _____
13. Are there any special requirements or considerations related to:
Water, traffic, gases, security, fire hazards, power, fuels, machinery, noise, vibration, glare,
smoke, fumes, dust, odors, radioactivity, other atmospheric pollutants, sanitary facilities?
If so, explain: _____

(Do not write below this line)

Zoning Officer _____	Construction Official _____
Township Engineer _____	Environ. Commission _____
Board of Health _____	County Planning Brd _____
Police Department _____	Tax Assessor _____
Fire Department _____	State D.E.P. _____
Planning Board Engineer _____	
Fees _____ Public Meeting Date _____	_____
	Planning Board Clerk
	Date