## APPLICATION FOR SUBDIVISION, SITE PLAN OR LOT CONSOLIDATION REVIEW OCEAN COUNTY PLANNING BOARD 129 Hooper Avenue, PO Box 2191 Toms River, NJ 08754-2191 Telephone (732) 929-2054 FAX (732) 244-8396

INSTRUCTIONS: All Applications for subdivision, site plan or lot consolidation requires three (3) completed copies of this application for, the original plan or site plan map plus three (3) paper copies. All applications must be filed at the Planning Board no later than five (5) working days prior to a scheduled meeting date. Meetings are normally held on the first (1st) and third (3rd) Wednesdays of each month. Applications under the development review jurisdiction of the Pinelands Commission must also meet the application requirements contained in the Comprehensive Management Plan for the Pinelands National Reserve and Pinelands Area adopted by the Pinelands Commission.

1.	Municipality or Municipalities in which project is located:		
2.	Project name or description		
3.	Tax block(s)		
4.	Tax map book(s)	Tax map she	eet(s)
5.	Location of project (street or streets)		
6.	Type of Application (check appropriate block or blocks)		
	Major SubdivisionImage: Constraint of the second secon	Preliminary Final Reapproval*	l l l Approval
	Other (specify)		
7.	Site size (acres)	No. of existing lots	
		No. of proposed lot	s
8.	Existing use(s)		
9.	Proposed use(s)		
11.	Residential Total no. of Proposed Dwelling Units         Unit Type:       Single Family         Duplex       Duplex         Townhouses       Condominium         Apartments       Other         Other       # of buildings         Proposed Building Size (square feet)       # of buildings         Parking Spaces:       Existing Parking Spaces         Proposed Standard Spaces	No. of Ui No. of Ui No. of Ui No. of Ui 	nits
	Total Parking Spaces		
13.	Amount of site covered with impervious surfaces		Existing
			Proposed
14.	Is a Variance Required		
	-		
15.	Applicant: Name		
	Firm or Company		
	Address Corporate Representative		
	Telephone		
16.	Owner: Name		
	Address		
	Corporate Representative		
	Telephone		Linan
17.	Engineer: Name		License No
	Firm or Company		
	Address		
	Telephone		Email

18. Attorney or Oth	Attorney or Other Representative:				
Name		Title			
Firm					
Telephone		Email			
19. Comments or no	tes				
	FOR APPLICATION WITHIN PINELAN	DS DEVELOPMENT REVIEW JURISDICTION			
20. Pinelands Certifi	cate of Filing Docket No				
Date of Issue					
21. Location of Site	<ul> <li>Pinelands Preservation Area</li> <li>Pinelands Protection Area</li> <li>Pinelands National Reserve</li> </ul>				
22. Land Capability	District(s)				
Date of Issue	-				
	ttach copies of all conditions)				
Pinelands Comr If yes, describe	<ul> <li>24. Has this project undergone any design, engineering, or other changes, including changes made in response to conditions imposed by the Pinelands Commission following receipt of a Pinelands Certificate of Filing? yes no</li> <li>If yes, describe changes</li></ul>				
		NING BOARD USE			
O.C.P.B. Code Num	ber	Date received			
ACTION TAKEN					
PRELIMINARY PLA	AT	FINAL PLAT			
Preliminary Approva	I	Final Approval			
Conditional Prelimin	ary Approval	Conditional Final Approval			
Disapproval		Disapproval			
e					
Right-or-Way Dedica					
Conditions					
Has this application u	indergone any design, engineering, or other changes	s following receipt of any of the following actions: YES NO			
Pinelands Commissions Certificate of Filing       Image: Commission certificate of Filing         Pinelands Commissions Development Review       Image: Certificate of Filing         Ocean County Planning Board Preliminary Approval       Image: Certificate of Filing         Pinelands Commissions Review of O.C.P.B. Preliminary Approval       Image: Certificate of Filing         Pinelands Commissions Review of O.C.P.B. Final Approval       Image: Certificate of Filing					
Describe changes					