

City of Burlington Joint Land Use Board

Land Use Development Application Application Submission Section A

Documents must be included in all application packages

- Land Use Development Application
- Affidavit of Noncollusion
- Ownership Disclosure Statement
- Request for List of Property Owners—submit to Tax Assessor when application is submitted to Board Secretary
- Completeness Checklist(s)

An original application package with all required signatures plus 15 collated copies must be delivered to the Board Secretary 15 calendar days prior to a scheduled meeting in order to be considered for that meeting. Submission of a package before the deadline does not guarantee that the application will be heard at the Board's next meeting. In addition to the application packages submitted to the Board Secretary, packages must also be delivered to each of the Board's professionals 15 calendar days prior to a scheduled meeting.



City of Burlington
Joint Land Use Board
City Hall, 525 High Street, Burlington, NJ 08016
609-386-0200 x. 147(Phone) 609-386-1258 (Fax)
www.burlingtonnj.us

LAND USE DEVELOPMENT APPLICATION

FOR OFFICE USE ONLY

Date Submitted	Application No.	App Fee Check #	Escrow Fee Check #
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1. APPLICANT/DEVELOPER

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: (____) _____ Fax: (____) _____

Email: _____

Interest in Property: _____

2. OWNER

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: (____) _____ Fax: (____) _____

Email: _____

Complete this section if applicant is not owner.

3. TYPE OF APPLICATION (check all that apply)

"a" Variance (Appeal)

"b" Variance (Interpretation)

"c" Variance (Bulk)

"d" Variance (Use)

Build on Lot Not Fronting on Street

Certificate of Nonconformity

Subdivision, Minor

Subdivision, Major Preliminary

Subdivision, Major Final

Site Plan, Minor

Site Plan, Waiver

Site Plan, Major Preliminary (Nonres or Res)

Site Plan, Major Final (Nonres or Res)

Subdiv. or Site Plan, Informal Review

Subdiv. or Site Plan, Extension of Approval

Subdiv. or Site Plan, Amend. of Approved Plan

Other: _____

4. APPLICANT'S ATTORNEY

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: (____) _____ Fax: (____) _____

Email: _____

5. APPLICANT'S ENGINEER

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: (____) _____ Fax: (____) _____

Email: _____

6. APPLICANT'S OTHER PROFESSIONALS (Architect, Planner, Surveyor, etc.)

Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone: (____) _____ Fax: (____) _____
Email: _____

Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone: (____) _____ Fax: (____) _____
Email: _____

7. LOCATION OF PROPERTY

Street Address: _____ Block(s): _____
Zone: _____ Lot(s): _____
Type of Road Frontage: _____ (Highway, County Road, Local Road)

8. LAND USE

Existing Land Use: _____
Proposed Land Use: _____

9. PROPERTY DETAILS

of Existing Lots: _____ # of Proposed Lots: _____
Existing Form of Ownership: Fee Simple Rental Condominium Cooperative
Existing Deed Restrictions or Easements: No Yes (attach copies)
Proposed Deed Restrictions or Easements: No Yes (attach copies)

10. UTILITIES (check all that apply)

Existing: Public Water Private Well Public Sewer Private Septic System
 Natural Gas Electric Propane
Proposed: Public Water Private Well Public Sewer Private Septic System
 Natural Gas Electric Propane

11. ZONING SCHEDULE (complete all that apply)					
	Required	Existing	Proposed		
Minimum Lot Requirements				Required	
Area				Existing	
Width				Proposed	
Depth					
Principal Buildings & Structures				Maximum Building & Structure Height	
1 Side Yard				Principle	
2 Side Yards				Accessory	
Front Yard				Maximum Lot & Building Coverages	
Rear Yard				Lot	
Accessory Building & Structures				Building	
Side Yard				Open Space Preserved	
Rear Yard				% of Tract	
Is the proposed site on an inside or corner lot?					
<input type="checkbox"/> Inside <input type="checkbox"/> Corner					

12. PARKING & LOADING REQUIREMENTS

of Parking Space Required: _____ # of Parking Spaces Provided: _____

of Loading Space Required: _____ # of Loading Spaces Provided: _____

13. OTHER APPROVALS REQUIRED

U.S. Army Corps of Engineers	<input type="checkbox"/> No	<input type="checkbox"/> Yes
N.J. Dept. of Environmental Protection	<input type="checkbox"/> No	<input type="checkbox"/> Yes
N.J. Dept. of Transportation	<input type="checkbox"/> No	<input type="checkbox"/> Yes
Burlington County Bridge Commission	<input type="checkbox"/> No	<input type="checkbox"/> Yes
Burlington County Planning Board	<input type="checkbox"/> No	<input type="checkbox"/> Yes
Burlington County Soil Conservation District	<input type="checkbox"/> No	<input type="checkbox"/> Yes
City of Burlington Historic Commission	<input type="checkbox"/> No	<input type="checkbox"/> Yes
State of New Jersey Sewer Extension	<input type="checkbox"/> No	<input type="checkbox"/> Yes
State of New Jersey Stream Encroachment	<input type="checkbox"/> No	<input type="checkbox"/> Yes
State of New Jersey Waterfront Development	<input type="checkbox"/> No	<input type="checkbox"/> Yes
State of New Jersey Wetlands	<input type="checkbox"/> No	<input type="checkbox"/> Yes
State of New Jersey Riparian Conveyance	<input type="checkbox"/> No	<input type="checkbox"/> Yes
Other: _____	<input type="checkbox"/> No	<input type="checkbox"/> Yes
Other: _____	<input type="checkbox"/> No	<input type="checkbox"/> Yes

14. APPLICATION SUBMISSION MATERIALS (use additional sheets if necessary)

List all plans, reports, photos, etc. _____

15. PREVIOUS OR PENDING APPLICATIONS (use additional sheets if necessary)

List all previous or pending applications for this parcel. If current application is for the Amendment of a previously approved Subdivision or Site Plan, furnish a copy of the previously approved plan and describe the proposed amendments.

16. RELIEF REQUESTED (use additional sheets if necessary)

List arguments for Variances, Waivers of Development Standards and/or Submission Requirements.

17. EXPERT WITNESSES FOR APPLICANT

Name: _____ Type of Testimony: _____

Name: _____ Type of Testimony: _____

Name: _____ Type of Testimony: _____

Name: _____ Type of Testimony: _____

18. SIGNATURE OF APPLICANT

I certify that the foregoing statements and the materials submitted are true. I further certify that I am the individual applicant, or that I am an Officer of the Corporate applicant or a General Partner of the Partnership applicant and am authorized to sign the application for the Corporation or Partnership.

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

SIGNATURE (applicant) DATE

NOTARY

PRINT NAME

19. CONSENT OF OWNER

NOTE: If the property is owned by a corporation or an LLC this "consent of owner" must be signed by a corporate officer or managing member and a resolution must be attached authorizing that corporate officer/managing member to sign on behalf of the entity.

I certify that I am the Owner of the property which is the subject of this application. I hereby consent to the filing of this application and to the approval of the plans submitted therewith. I further consent to the inspection of the property in connection with this application as deemed necessary by the board and its professional staff.

I am aware that the City will incur costs for professional review fees in the course of hearing and deciding this application. I am aware that the applicant has signed an escrow agreement that requires said applicant to be responsible to pay the City for the costs incurred. By consenting to the filing of this application I agree that, in the event the applicant fails to pay all of those costs, I will be responsible to pay, and I will pay, any balance of those costs owed by the applicant to the City. I further understand that if I fail to pay the amount owed the City may seek and win a judgment against me for the amount owed plus counsel fees and costs and that that judgment may become a lien against my property.

SWORN & SUBSCRIBED before me this
_____ day of _____, 20____

NOTARY

SIGNATURE (owner) DATE

PRINT NAME

20. DISCLOSURE STATEMENT

If applicant is a corporation, partnership or LLC please answer the following questions pursuant to N.J.S.A. 40:55D-48.1 & 48.2:

- Is this application to subdivide a parcel of land into six (6) or more lots? No Yes
- Is this application for a variance to construct a multiple dwelling unit of 25 or more units? No Yes
- Is this application for approval of a site (or sites) for non-residential purposes? No Yes

If you responded YES to any of the above questions, Ownership Disclosure Statement must be completed.

SIGNATURE (applicant) DATE

21. SURVEY WAIVER CERTIFICATION

As of the date of this application, I hereby certify that the survey submitted with this application which is dated _____ shows and discloses the premises in its entirety, described as Block _____ Lot _____; and I further certify that no buildings, fences or other facilities have been constructed, installed or otherwise located on the premises after the date of the survey with the exception of the structures shown.

SWORN & SUBSCRIBED before me this
_____ day of _____, 20____

NOTARY

SIGNATURE (applicant/owner) DATE

PRINT NAME

AFFIDAVIT OF NONCOLLUSION

STATE OF NEW JERSEY :
 :
 : S
 :
 COUNTY OF BURLINGTON :

_____ being duly sworn according to law upon his oath, deposes and says:
 NAME OF APPLICANT

He/she is the applicant in connection with a property known as _____
 STREET ADDRESS
 Block _____ and Lot _____.

There has been no collusion between the applicant and any member of the City of Burlington Joint Land Use Board or any officials of the City of Burlington with respect to said application.

SWORN & SUBSCRIBED before me this _____ day of _____, 20____	_____ SIGNATURE (applicant) DATE
_____ NOTARY	_____ PRINT NAME

OWNERSHIP DISCLOSURE STATEMENT

NAME OF CORPORATION, PARTNERSHIP OR LLC: _____

Listed below are the names and addresses of all owners of 10% or more of the stock/interest* in the above referenced corporation or partnership:

	NAME	ADDRESS
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		

*If a corporation or a partnership owns 10% or more of the stock of a corporation or 10% or greater interest in a partnership, that corporation or partnership shall list the names and addresses of its stockholders holding 10% or more of its stock or 10% or greater interest in the partnership, and this requirement shall be followed until the names and addresses of the non-corporate stockholders and individual partners exceeding the 10% ownership criterion established have been listed.

SWORN & SUBSCRIBED before me this

_____ day of _____, 20_____

SIGNATURE (applicant)

DATE

NOTARY

PRINT NAME

REQUEST FOR LIST OF PROPERTY OWNERS

To: City of Burlington
 Attn: Tax Assessor
 525 High Street
 Burlington, NJ 08016

Subject property must be identified by Block, Lot and Street Address. If the property contains multiple lots, list each lot separately. If the property is on multiple blocks, use separate lines for each block.

Street Address	Block	Lot	Lot	Lot

I do hereby request that the Tax Assessor compile and certify a list of Property Owners within 200 feet of the property described above. With this request, I hereby submit the required fee of \$10.00 or \$.25 per name, whichever is greater.

Requestor's Name: _____

Address: _____ Phone: _____

_____ E-mail: _____

Signature: _____ Date: _____

Note—Your request will be processed by the Tax Assessor within seven (7) calendar days of the filing of this form and payment of the required fees as required by N.J.S.A. 40:55D-12c. The seven (7) day time period will begin on the day that this form and the required fee are received by the Tax Assessor.

Adjoining Municipalities—If the subject property is within 200 feet of an adjacent municipality, notice of your application must be served on the Clerk of that municipality. In addition, you must request a 200' list from the municipality and notice of your application must be served on the persons and entities whose names appear on that list.

OFFICE USE ONLY

AMOUNT: _____ CASH _____ CHECK _____

DATE PAID: _____

