

**CITY OF ABSECON ZONING BOARD**  
500 Mill Road  
Absecon, NJ 08201  
Phone - 609-641-0663 Ext. 112 fax - 609-645-5098

**APPLICATION FOR LAND DEVELOPMENT - ZONING BOARD**

The application with supporting documentation must be filed with the Zoning Board Secretary (30) days prior to the meeting at which the application is to be considered.

**To be completed by City staff only.**

Date Filed: \_\_\_\_\_ Application No. \_\_\_\_\_  
Application Fee \_\_\_\_\_  
Escrow Deposit \_\_\_\_\_  
Scheduled for: Review for Completeness \_\_\_\_\_ Hearing \_\_\_\_\_

**TO BE COMPLETED BY APPLICANT**

**1. SUBJECT PROPERTY**

Location: \_\_\_\_\_  
Tax Map Page \_\_\_\_\_ Block \_\_\_\_\_ Lot(s) \_\_\_\_\_  
Page \_\_\_\_\_ Block \_\_\_\_\_ Lot(s) \_\_\_\_\_  
Dimensions Frontage \_\_\_\_\_ Depth \_\_\_\_\_ Total Area \_\_\_\_\_  
Zoning District \_\_\_\_\_

**2. APPLICANT**

Name \_\_\_\_\_  
Address \_\_\_\_\_  
Telephone Number \_\_\_\_\_  
Applicant is a Corporation \_\_\_\_\_ Partnership \_\_\_\_\_ Individual \_\_\_\_\_

**3. DISCLOSURE STATEMENT**

Pursuant to NJS 40:550-48.1, the names and addresses of all persons owning 10% of the stock in a corporate applicant or 10% interest in any partnership applicant must be disclosed. In accordance with NJS 40:550-48.2 that disclosure requirement applies to any corporation or partnership which owns more than 10% interest in the applicant followed up the chain of ownership until the names and addresses of the non-corporate stockholders and partners exceeding the 10% ownership criterion have been disclosed. (Attach pages as necessary to fully comply.)

Name \_\_\_\_\_ Address \_\_\_\_\_ Interest \_\_\_\_\_  
Name \_\_\_\_\_ Address \_\_\_\_\_ Interest \_\_\_\_\_

**4. If Owner is other than the applicant, provide the following information on the Owner(s):**

Name \_\_\_\_\_  
Address \_\_\_\_\_  
Telephone \_\_\_\_\_

**5. PROPERTY INFORMATION:**

Restrictions, covenants, easements, association by-laws, existing or proposed on the property:

Yes (attach copies)\_\_\_\_\_ No\_\_\_\_\_ Proposed\_\_\_\_\_

Note: All deed restrictions, covenants, easements, association bylaws, existing and proposed must be submitted for review and must be written in easily understandable English in order to be approved.

6.Applicant's Attorney\_\_\_\_\_
Address\_\_\_\_\_
TelephoneNumber\_\_\_\_\_ FAX #\_\_\_\_\_

7. Applicant's Engineer\_\_\_\_\_
Address\_\_\_\_\_
TelephoneNumber\_\_\_\_\_ FAX #\_\_\_\_\_

8.Applicant's Planning Consultant\_\_\_\_\_
Address\_\_\_\_\_
Telephone # \_\_\_\_\_ FAX #\_\_\_\_\_

9. Applicant's Traffic Engineer\_\_\_\_\_
Address\_\_\_\_\_
Telephone # \_\_\_\_\_ FAX #\_\_\_\_\_

10. List any other Expert who will submit a report or who will testify for the Applicant: (Attach additional sheets as may be necessary)

Name\_\_\_\_\_
Field of Expertise\_\_\_\_\_
Address\_\_\_\_\_
Telephone # \_\_\_\_\_ FAX Number\_\_\_\_\_

**11. APPLICATION REPRESENTS A REQUEST FOR THE FOLLOWING:
SUBDIVISION:**

**SITE PLAN:**

\_\_\_\_\_ Amendment or Revision to an Approved Site Plan

Area to be disturbed (square feet)\_\_\_\_\_

Total Number of Proposed Dwelling Units\_\_\_\_\_

\_\_\_\_\_ Variance Relief (hardship) [NJS 40:55D-70c(1)]

\_\_\_\_\_ Variance Relief (substantial benefit) [NJS 40:55D-70c(2)]

\_\_\_\_\_ Conditional Use Approval [NJS 40:55D-67]

\_\_\_\_\_ Direct issuance of a permit for a lot lacking street frontage
[NJS 40:55d-35]

12. Section(s) of Ordinance from which a variance is requested: \_\_\_\_\_

13. Waivers Requested of Development Standards and/or Submission Requirements: [attach additional pages as needed]

14. Attach a copy of the Notice to appear in the official newspaper of the municipality and to be mailed to the owners of all real property, as shown on the current tax duplicate, located within the State and within 200 feet in all directions of the property which is the subject of this application. The Notice must specify the sections of the Ordinance from which relief is sought, if applicable.

The publication and the service on the affected owners must be accomplished at least 10 days prior to the date scheduled by the Board Secretary for the hearing. An affidavit of service on all property owners and a proof of publication must be filed before the application will be complete and the hearing can proceed.

15. Explain in detail the exact nature of the application and the changes to be made at the premises, including the proposed use of the premises:  
[attach pages as needed \_\_\_\_\_]

16. Is a public water line available? \_\_\_\_\_

17. Is public sanitary sewer available? \_\_\_\_\_

18. Does the application propose a well and septic system? \_\_\_\_\_

19. Are any off-tract improvements required or proposed? \_\_\_\_\_

20. What form of security does the applicant propose to provide as performance and maintenance guarantees? \_\_\_\_\_

21. Other approvals that may be required and date plans submitted:

|   | Yes   | No    | Date Plans Submitted |
|---|-------|-------|----------------------|
| Atlantic County Utilities Authority       | _____ | _____ | _____                |
| ___ County Health Department              | _____ | _____ | _____                |
| ___ County Planning Board                 | _____ | _____ | _____                |
| ___ County Soil Conservation District     | _____ | _____ | _____                |
| NJ Department of Environmental Protection | _____ | _____ | _____                |
| Sewer Extension Permit                    | _____ | _____ | _____                |
| Sanitary Sewer Connection Permit          | _____ | _____ | _____                |
| Stream Encroachment Permit                | _____ | _____ | _____                |
| Waterfront Development Permit             | _____ | _____ | _____                |
| Wetlands Permit                           | _____ | _____ | _____                |

|                                   |       |       |       |
|-----------------------------------|-------|-------|-------|
| Tidal Wetlands Permit             | _____ | _____ | _____ |
| Potable Water Construction Permit | _____ | _____ | _____ |
| NJ Department of Transportation   | _____ | _____ | _____ |
| CAFRA Permit                      | _____ | _____ | _____ |
| Atlantic City Electric Co.        | _____ | _____ | _____ |
| South Jersey Gas Co.              | _____ | _____ | _____ |
| Other                             | _____ | _____ | _____ |

22. Certification from the Tax Collector that all taxes due on the subject property have been paid must be included with this application.

23. List of Maps, Reports and other materials accompanying the application (attach additional pages as required for complete listing ).

| Quantity | Description of Item |
|----------|---------------------|
| _____    | _____               |
| _____    | _____               |
| _____    | _____               |

24. The Applicant hereby requests that copies of the reports of the professional staff reviewing the application be provided to the following of the applicant's professionals:

Specify which reports are requested for each of the applicant's professionals and whether all reports should be submitted to the professional listed.

| Applicant's Professionals | Reports Requested |
|---------------------------|-------------------|
| Attorney                  | _____             |
| Engineer                  | _____             |
| Planner                   | _____             |

**CERTIFICATIONS**

25. 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 and that I am authorized to sign the application for the Corporation or that I am a general partner of the partnership applicant.

[If the applicant is a corporation, this must be signed by an authorized corporate officer. If the applicant is a partnership, this must be signed by a general partner.]

Sworn to and subscribed before me this

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

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

\_\_\_\_\_  
SIGNATURE OF APPLICANT

28. I certify that I am the Owner of the property which is the subject of this application, that I have authorized the applicant to make this application and that I agree to be bound by the application, the representations made and the decision in the same manner as if I were the applicant.

[If the owner is a corporation this must be signed by an authorized corporate officer. If the owner is a partnership, this must be signed by a general partner.]

Sworn to and subscribed before me this

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

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

\_\_\_\_\_  
SIGNATURE OF OWNER

29. I understand that the sum of \$\_\_\_\_\_ has been deposited in an escrow account. In accordance with the Ordinance of the City of Absecon, 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 submitted materials. Sums not utilized in the review process shall be returned. If additional sums are deemed necessary, I understand that I will be notified of the required additional amount and shall add that sum to the escrow account within fifteen (15) days.

\_\_\_\_\_  
DATE

\_\_\_\_\_  
SIGNATURE OF APPLICANT