

**BOROUGH OF OAKLAND
BERGEN COUNTY, NEW JERSEY**

LAND DEVELOPMENT APPLICATION

Date _____

**NOTE: APPLICATION SETS MUST BE COLLATED AND
SUBMITTED IN PACKET FORM FOR PROCESSESSING.**

Application No.	_____
Date Received	_____
Fee Submitted	_____
Jurisdiction Date	_____
Complete Date	_____
Decision Date by	_____
Board Action	_____
FOR OFFICIAL USE ONLY	

The undersigned, as Applicant/Owner of the subject property identified herein hereby makes application to the Borough of Oakland for (check all that apply)

<input type="checkbox"/> New Application	<input type="checkbox"/> Major Subdivision Preliminary	<input type="checkbox"/> Major Site Plan Preliminary
<input type="checkbox"/> Amendment to prior approval	<input type="checkbox"/> Major Subdivision Final	<input type="checkbox"/> Major Site Plan Final
<input type="checkbox"/> Concept Plan (PB only)	<input type="checkbox"/> General Development Plan	<input type="checkbox"/> Conditional Use
<input type="checkbox"/> Minor Subdivision	<input type="checkbox"/> Minor Site Plan	

Indicate Relief to be Requested in Conjunction with this Application

<input type="checkbox"/> Use Variance (N.J.S.A. 40:55D-70.d)	<input type="checkbox"/> Bulk Variance(s) (N.J.S.A.40:55D-70.c)
<input type="checkbox"/> RSIS Exception (N.J.A.C. 5: 21-3.2)	<input type="checkbox"/> Design Standard Waiver(s) <input type="checkbox"/> Environmental Protection Waiver

1. APPLICANT INFORMATION

- a. Name: _____
- b. Address: _____
- c. Telephone (include fax number if desired): _____
- d. Applicant is a: (check applicable status)

☐ Corporation ☐ Partnership ☐ Individual (s)
- e. If applicant is a corporation or a partnership, please list the names and addresses of persons having a 10 % interest or more in the corporation or partnership on a separate sheet and attach to this application.
- f. Relationship of applicant to property (check applicable status):

☐ Owner ☐ Purchaser under contract ☐ Lessee

☐ Other (please specify): _____
- g. If applicant is represented by an attorney:

Name: _____

Address: _____

Telephone: _____ Fax: _____
- h. Preparation of Plans by:

Name: _____

Address: _____

Tel: _____ Fax: _____

2. PROPERTY INFORMATION

- a. Street address _____
- b. Tax Map Block(s) _____ Lot (s) _____
- c. Zone District _____
- d. Existing Use of Property _____
- e. Please list prior applications or municipal actions regarding this property:
- _____
- _____
- f. Property is located (check applicable status):
- _____ Within 200 feet of another municipality. _____ Adjacent to a State Highway.
- _____ Adjacent to an existing or proposed County road. _____ Adjacent to other County land.

Note: If any category is checked, notification concerning this application to the appropriate agency is required.

- g. Property has public sanitary sewer access available? Yes / No. If not what solution is proposed to handle sanitary waste. _____
- _____
- _____

3. NATURE OF APPLICATION: (check where appropriate)

- a. ___ Minor Subdivision/ Major Subdivision:
- (1) Indicate total tract size: _____ acres
- (2) Proposed number of lots: _____
- b. ___ Residential Development (clearly detail proposed use of property): _____
- _____
- _____
- c. ___ Non-Residential Development (clearly detail proposed use of property): _____
- _____
- _____
- _____
- d. Contemplated form of ownership (check all that apply):
- ___ Fee simple ___ Condominium ___ Cooperative ___ Rental
- e. Are there any existing Deed Restrictions? ___ No ___ Yes (attach copy of restriction)
- f. Are there any proposed Deed Restrictions? ___ No ___ Yes (attach copy of restriction)
- g. List exhibits accompanying this application: (attach separate sheet if necessary)
- _____
- _____
- _____
- _____
- h. Indicate if this is a bifurcated use variance application: ___ yes ___no

If yes, note that any approval, if granted by the Board of Adjustment, shall be conditioned upon submittal of a completed site plan application being submitted to the Board of Adjustment for approval (N.J.S.A. 40:55D-76).

4. VARIANCE (S) REQUESTED: If this application requires a variance from the strict application of the Borough of Oakland Zoning Ordinance for a use permitted in the Zone in which the property is located complete the section below requesting said relief. You may attach additional sheets if needed.

<u>Section</u>	<u>Required</u>	<u>Proposed</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

5. SPECIFIC DESIGN WAIVER (s) RELIEF REQUESTED

<u>Section</u>	<u>Required</u>	<u>Proposed</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

7. SPECIFIC RELIEF REQUESTED

If relief is requested in connection with this development proposal for any category as indicated on the front page of this application and outlined above, attach hereto a separate exhibit(s) for each category of relief sought, stating the factual basis, legal theory, and whether they have been previously granted. Failure to supply this information if applicable will result in your application being deemed incomplete.

8. OTHER INFORMATION REQUIRED

- a. Attach completed checklist.
- b. Attach certification of payment of taxes from Township Tax Collector.
- c. Attach any other government approvals if received in connection with this application such as NJDEP permits, NJDOT permits, Passaic County Approvals etc.

9. VERIFICATION AND AUTHORIZATION

- a. Applicant’s Statement: I hereby certify that the above statements made by me and the statements and information contained in the papers submitted in connection with this application are, to the best of my knowledge, true and accurate.

Applicant’s SignatureDate

- b. Owner’s Statement: I, the undersigned, being the owner of the property described in this application, hereby consent to the making of this application and the approval of the plans submitted. I further consent to the inspection of this property in connection with this application as deemed necessary by the municipal agency.

Owner’s SignatureDate

Sworn and Subscribed to before me

_____ day of _____, _____ (Year)

(Notary)