

TOWNSHIP OF TOMS RIVER PLANNING BOARD

APPLICATION FOR MINOR AND MAJOR SITE PLAN APPROVAL

- 1) "UNIFIED LAND DEVELOPMENT APPLICATION" FORMS COMPLETED, SIGNED AND NOTARIZED.
- 2) ALL ITEMS LISTED IN THE DEVELOPMENT APPLICATION CHECKLIST – SCHEDULE "A" SUBMISSION REQUIREMENTS.

3) * NONREFUNDABLE FEES AS FOLLOWS:

a) Minor Site Plan	\$500.00
b) Preliminary Major Site Plan	\$1,500.00
c) Final Major Site Plan	\$500.00
d) Variance	\$750.00
e) Design Exception	\$100.00 ea.
f) Request for waiver of plat detail	\$50.00 ea. (\$250.00 maximum)
g) Fire Safety Review**†	\$150.00 Minor Site Plan \$200.00 Major Site Plan
h) Education Fee**	\$25.00 Minor Site Plan \$50.00 Major Site Plan
i) Tree Management Plan**	\$100.00

NOTE: For details on the Township's fee requirements, please refer to Land Use and Development Regulations (348-3.4)

- 4) ** ESCROW FEE
a) Minor Site Plan \$1,000.00
b) Preliminary Major Site Plan \$2,500.00 plus \$100.00 per additional acre or portion thereof
c) Final Major Site Plan \$1,000.00
b) Variance \$2,000.00

- 5) ALL OTHER SUBMISSIONS THAT MAY BE REQUESTED BY THE BOARD ENGINEER OR MAY BE REQUIRED BY LAW.

***ALL CHECKS MUST BE MADE PAYABLE TO "TOWNSHIP OF TOMS RIVER"**

****MUST BE SEPARATE CHECKS**

†PURSUANT TO CHAPTER 308-55 OF THE MUNICIPAL CODE



**TOWNSHIP OF TOMS RIVER
DEPARTMENT OF ENGINEERING AND COMMUNITY DEVELOPMENT
DIVISION OF LAND USE REGULATION
UNIFIED LAND DEVELOPMENT APPLICATION**

PLEASE PRINT OR TYPE:

1. APPLICANT

NAME:

ADDRESS:

PHONE:

FAX:

E-MAIL:

2. OWNER (IF DIFFERENT FROM APPLICANT)

NAME:

ADDRESS:

PHONE:

FAX:

E-MAIL:

3. SUBJECT PROPERTY

STREET ADDRESS: _____

TAX MAP SHEET _____

TAX LOT _____ TAX BLOCK _____

APPROXIMATE SIZE _____ ACRES OR _____ SQ. FEET

ZONING DISTRICT _____

EXISTING USE OF PROPERTY: _____

COPY OF DEED ATTACHED? YES _____ NO _____

DEED RESTRICTIONS: YES _____ NO _____

(IF YES, PLEASE PROVIDE COPY)

4. BRIEF DESCRIPTION OF APPLICATION:

5. REQUESTED APPROVAL (CHECK ALL THAT APPLY)

DEVELOPMENT PERMIT _____

SUBDIVISION CERTIFICATION
(N.J.S.A. 40:55D-56) _____

NON-CONFORMING USE CERTIFICATION
(N.J.S.A. 40:55D-68) _____

SUBDIVISION EXEMPTION CERTIFICATE
(N.J.S.A. 40:55D-7) _____

MINOR SUBDIVISION _____

PRELIMINARY MAJOR SUBDIVISION _____

FINAL MAJOR SUBDIVISION _____

CONDITIONALLY EXEMPT SITE PLAN _____

MINOR SITE PLAN _____

PRELIMINARY MAJOR SITE PLAN _____

FINAL MAJOR SITE PLAN _____

CONDITIONAL USE _____

SPECIAL REASONS VARIANCE FOR
COMMERCIAL USE, MULTI-FAMILY
USE OR RESIDENTIAL
SUBDIVISIONS _____

SPECIAL REASONS VARIANCE FOR
SINGLE OR TWO FAMILY RESIDENTIAL
USE
(N.J.S.A. 40:55D-70d) _____

SITE PLAN OR SUBDIVISION
ANCILLARY VARIANCE
(N.J.S.A. 40:55d-70c) _____

SINGLE UNDERSIZED RESIDENTIAL
LOT VARIANCE _____

SINGLE OR TWO FAMILY RESIDENTIAL
DETACHED GARAGE OR INGROUND
POOL VARIANCE _____

ALL OTHER SINGLE OR TWO FAMILY
RESIDENTIAL ACCESSORY STRUCTURES
(POOL, SHED, ETC,) _____

FENCE VARIANCE _____

SINGLE FAMILY ADDITION VARIANCE _____

APPEAL (N.J.S.A. 40:55D-70(A)) _____

INTERPRETATION
(N.J.S.A. 40:55d-70(B)) _____

EXTENSIONS OF PRIOR APPROVAL _____

INFORMAL MEETING _____

AMENDED RESOLUTION _____

SIGN VARIANCE _____

N.J.S.A. 40:55d-34/35 VARIANCE _____

ZONING CHANGE REQUEST _____

6. NUMBER OF PROPOSED LOTS _____

7. LIST ALL VARIANCES REQUIRED: (USE SEPARATE SHEET, IF
NECESSARY)

8. LIST ALL DESIGN WAIVERS REQUESTED:

9. ATTORNEY:

NAME:

ADDRESS:

TELEPHONE:

FAX:

E-MAIL

10. ENGINEER:

NAME:

ADDRESS:

TELEPHONE:

FAX:

E-MAIL

11. ARCHITECT:

NAME:

ADDRESS:

TELEPHONE:

FAX:

E-MAIL

12. OTHER EXPERTS (USE ADDITIONAL SHEET IF NECESSARY)

NAME:

ADDRESS:

TELEPHONE:

FAX:

E-MAIL

13. PUBLIC WATER LINE AVAILABLE? YES _____ NO _____

14. PUBLIC SANITARY SEWER AVAILABLE? YES _____ NO _____

15. DOES APPLICATION PROPOSE A WELL AND SEPTIC? YES _____ NO _____

16. DESCRIBE ANY OFF TRACT IMPROVEMENT REQUIRED OR PROPOSED:

17. LIST ALL REQUIRED OUTSIDE AGENCY APPROVALS AND STATUS OF SAME:

_____	_____
_____	_____
_____	_____

18. LIST OF ALL MAPS, REPORTS AND OTHER MATERIALS SUBMITTED:

QUANTITY	DESCRIPTION OF ITEM	DATE OF ITEM
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

19. APPLICANT'S CERTIFICATION:

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

20. OWNER'S CERTIFICATION:

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



Development Application Checklist

Township of Toms River
33 Washington Street
Toms River, NJ 08753
732 341-1000

Planning Board _____ *Zoning Board* _____

Schedule "A" Submission Requirements

- () 1. Original and five copies of the Unified Land Development Application form, fully completed, signed and notarized
- () 2. Fees in accordance with §348-3.4
- () 3. Form W-9 and Escrow Replenishment Agreement
- () 4. Original and 8 copies of signed and sealed property survey less than one year old
- () 5. 10 copies of plot plan showing proposed improvements; or 8 sets of subdivision plats or site plans; **Electronic copy of subdivision plans or site plans in PDF format** (11 sets of 11x17 required five days prior to Board meeting)
- () 6. 10 sets of architectural floor plans and façade elevations (if any)
- () 7. Completed Schedule "B" checklist and a list of any waiver requests, together with a statement of reasons why waivers should be granted.
- () 8. One of the following
 - () a. A letter of interpretation from the N.J. D.E.P. indicating the absence of freshwater wetlands, or indicating the presence and verifying delineation of the boundaries of freshwater wetlands and related transition areas
 - () b. A finding by the Board Engineer, on applications for principal or accessory structures on existing single-family or two-family lots, that there are no freshwater wetlands on the lot or within 200 feet thereof
- () 9. If a corporation, limited liability company, or partnership, list the names and addresses of all parties owning at least 10% of the entity as required by N.J.S.A. 40:55D-48.1 et seq. (Blank disclosure forms are available at the Board office.)
- () 10. Copy of application filed with Ocean County Planning Board (except bulk variances)
- () 11. Copy of application filed with Toms River Municipal Utilities Authority (except bulk variances)
- () 12. Copy of application filed with Ocean County Soil Conservation District (except bulk variances)
- () 13. Statement of operations (except bulk variances)
- () 14. If tree removal is involved, a Tree Management Plan, with fees
- () 15. Evidence of filing with water company (United Water or NJ American)(except bulk variances)
- () 16. Flood Zone Certification Form – For any area in a Flood Zone, for Board of Adjustment Applications only
- () 17. Evidence of filing with electric utility (Jersey Central Power & Light), for Board of Adjustment Applications only

Reviewed by: _____

Application Name: _____

Block: _____; Lot(s) _____

Date: _____

Application:

Schedule B Checklist

Planning Board _____

Block _____ Lot(s) _____

Township of Toms River

Zoning Board _____

		Minor Site Plan	Prelim. Major Site Plan	Final Major Site Plan	Minor Subdivision	Prelim. Major Subdivision	Final Major Subdivision	Bulk Variance	Use Variance	Applicant submission	Board Receipt	Not Applicable	Waiver (Attach Reason)
Plat Specifications													
1	Clear, legible plat at a scale of not less than 1" = 60'.	X	X	X	X	X	X	X	X				
2	Signature, seal, address, license number of professional preparing plat.	X	X	X	X	X	X	X	X				
3	Plat based on land survey less than 12 months old.	X	X	X	X	X	X	X	X				
4	Sheet size up to 30"x42".	X	X	X	X	X	X	X	X				
5	Each sheet numbered and titled.	X	X	X	X	X	X	X	X				
General Information													
6	Existing and proposed lot lines with dimensions, bearing and curve data.	X	X	X	X	X	X	X	X				
7	Key map: showing site location and streets, street names, and zone boundaries within 500 ft.	X	X	X	X	X	X	X	X				
8	Title block: applicant name, name of development, preparer, tax sheet, lot and block numbers, date prepared, application type, and zoning district.	X	X	X	X	X	X	X	X				
9	Names, addresses and block and lot numbers of all owners within 200 feet.	X	X	X	X	X	X	X	X				
10	Date of original and all revisions.	X	X	X	X	X	X	X	X				
11	Written and graphic map scale.	X	X	X	X	X	X	X	X				
12	North arrow with reference meridian.	X	X	X	X	X	X	X	X				
13	Date and signature as per the "Map Filing Law".				X	X	X						
14	Table of zoning requirements, showing existing conditions, nonconformities and proposed variances.	X	X	X	X	X	X	X	X				
15	Area of the tract and of each lot.	X	X	X	X	X	X	X	X				
Natural Features													
16	For proposed site improvements, regrading or disturbance over 150 sq. ft., existing and proposed contours at one foot intervals showing surface drainage and topography within 50 ft.	X			X			X					
17	Existing and proposed contours at one foot intervals showing surface drainage and topography within 200 ft.		X	X		X	X	X					
18	All existing watercourses and related areas that are subject to 100 year floods under FEMA standards.	X	X	X	X	X	X	X					
19	Wetlands and wetland transition area boundaries	X	X	X	X	X	X	X	X				
20	Features required for Tree Management Plan under the provisions of Chapter 348-12.	X	X	X	X	X	X	X	X				
Man-made Features													
21	Show existing structures and setbacks from existing and proposed property lines, indicating those to be modified or removed or to remain.	X	X	X	X	X	X	X	X				
22	Location of proposed buildings, first floor and basement or cellar elevations	X	X	X	X	X	X	X	X				
23	Building and impervious coverage calculations.	X	X	X				X	X				
24	Existing and proposed easements, rights-of-way and their purposes.	X	X	X	X	X	X	X	X				
25	Existing and proposed manholes, sewer lines, stormwater management facilities, waterlines, fire hydrants, and utility poles within 200 feet.	X	X	X	X	X	X	X	X				
26	Location of existing wells and septic systems.	X	X		X	X		X	X				

Reviewed by: _____

Application:

Schedule B Checklist

Planning Board _____

Block _____ Lot(s) _____

Township of Toms River

Zoning Board _____

		Minor Site Plan	Prelim. Major Site Plan	Final Major Site Plan	Minor Subdivision	Prelim. Major Subdivision	Final Major Subdivision	Bulk Variance	Use Variance	Applicant submission	Board Receipt	Not Applicable	Waiver (Attach Reason)
27	Plans and profiles of proposed utility layouts, including sewers, storm drains, water, gas, and electric, showing feasible connections to existing or proposed utility systems as well as channel section details, pipe sizes, types and inverts, road crowns and slopes.		X	X		X	X						
28	Monumentation required as per the "Map Filing Law"				X	X	X						
29	Off-street parking and loading spaces required and proposed, and location and dimensions of access drives, aisles, and parking stalls.	X	X	X				X	X				
Streets													
30	Location, names and widths of all existing and proposed streets, sidewalks and street widenings within 200 feet of the site.	X	X	X	X	X	X						
31	Plans, profiles and cross-sections of paved areas, curbs and sidewalks.	X	X	X	X	X	X						
Miscellaneous													
32	Soil boring logs in accordance with Chapter 348-6.9B(24) or 348-6.10B(16).		X	X		X	X						
33	Exterior lighting plan showing the location, direction of illumination, amount of illumination expressed in horizontal foot candles, wattage and drawn details of all outdoor lighting standards and fixtures.	X	X	X		X	X						
34	Landscaping and buffering plan showing the location, type of tree or shrub and the location, type and amount of each type of ground cover.	X	X	X	X	X	X						
35	Soil erosion and sediment control plan consistent with the requirements of the local Soil Conservation District.	X	X		X	X							
36	Stormwater system maintenance plan including: specific preventive maintenance tasks and schedules; cost estimates including the estimated cost of sediment, debris, and trash removal; and the name, address and telephone number of the party responsible for maintenance.	X	X	X		X							
37	Maintenance manual in book form for NJDEP "major" stormwater projects, which includes one or more acres of site disturbance or 0.25 acres or more of additional impervious surface. Submit three copies.	X	X	X	X	X	X	X	X				
38	Storm drainage calculations.		X			X							
39	Stormwater management facilities showing all aspects of the stormwater system on the grading plan.	X	X	X		X	X						
40	All sign locations and drawn details showing the size, construction type, height, and content of all signs.	X	X	X									
41	Drawn details of screening to be used for the refuse storage areas, outdoor equipment and bulk storage.	X	X	X									
42	Drawings, details and written descriptions, as needed, to address the management of solid waste, recyclables and any hazardous materials requiring special handling under State or Federal codes.	X	X	X									

Reviewed by: _____

Date: _____

Request for Taxpayer Identification Number and Certification

**Give Form to the
 requester. Do not
 send to the IRS.**

Print or type See Specific Instructions on page 2.	1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.	
	2 Business name/disregarded entity name, if different from above	
	3 Check appropriate box for federal tax classification; check only one of the following seven boxes: <input type="checkbox"/> Individual/sole proprietor or single-member LLC <input type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶ _____ Note. For a single-member LLC that is disregarded, do not check LLC; check the appropriate box in the line above for the tax classification of the single-member owner. <input type="checkbox"/> Other (see instructions) ▶ _____	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) _____ Exemption from FATCA reporting code (if any) _____ <i>(Applies to accounts maintained outside the U.S.)</i>
	5 Address (number, street, and apt. or suite no.)	Requester's name and address (optional)
	6 City, state, and ZIP code	
	7 List account number(s) here (optional)	

Part I Taxpayer Identification Number (TIN)																																																			
Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see <i>How to get a TIN</i> on page 3.	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="2" style="text-align: center; padding: 2px;">Social security number</td> </tr> <tr> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> </tr> <tr> <td colspan="12" style="text-align: center; padding: 2px;">or</td> </tr> <tr> <td colspan="12" style="text-align: center; padding: 2px;">Employer identification number</td> </tr> <tr> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> </tr> </table>	Social security number														or												Employer identification number																							
Social security number																																																			
or																																																			
Employer identification number																																																			
Note. If the account is in more than one name, see the instructions for line 1 and the chart on page 4 for guidelines on whose number to enter.																																																			

Part II Certification	
Under penalties of perjury, I certify that:	
1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and	
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and	
3. I am a U.S. citizen or other U.S. person (defined below); and	
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.	
Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions on page 3.	

Sign Here	Signature of U.S. person ▶	Date ▶
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General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. Information about developments affecting Form W-9 (such as legislation enacted after we release it) is at www.irs.gov/fw9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following:

- Form 1099-INT (interest earned or paid)
- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)

- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding? on page 2.

By signing the filled-out form, you:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
2. Certify that you are not subject to backup withholding, or
3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income, and
4. Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See *What is FATCA reporting?* on page 2 for further information.



TOWNSHIP OF TOMS RIVER

DEPARTMENT OF ENGINEERING AND COMMUNITY DEVELOPMENT

DIVISION OF LAND USE REGULATION

ESCROW REPLENISHMENT AGREEMENT

This agreement is made between the Township of Toms River ("Township") and _____ ("Applicant"), and _____ ("Property Owner" if different from applicant), pursuant to the provisions of N.J.S.A. 40:55D-53.2(c).

The parties to this agreement acknowledge that the applicant has submitted an application for land development to the Toms River Township Planning Board or Board of Adjustment. In accordance with the requirements of the Toms River Township Escrow Fee Ordinance, the applicant has deposited the sum of \$_____ with the Township of Toms River to cover the cost and expenses of all reviews by the professionals retained by the applicable Board regarding the submitted application.

The applicant agrees that upon notification by mail from the Board Clerk that whenever the amount remaining in the escrow accounts drops to 25% of the original escrow fee, the applicant will agree to replenish the escrow account within ten (10) days from the date of the mailing of the notice to an extent equal to 50% of the original escrow fee. The applicant also agrees to pay any deficiencies in said account simultaneously. The applicant acknowledges that he/she has been provided with a copy of the Township Ordinance relating to the payment and replenishment of the aforesaid escrow review fees and agrees to otherwise fully comply with the requirements of the same.

In the event there is a failure to replenish the escrow account in accordance with the terms of the Agreement, the Township has the right to withhold the zoning permit or the issuance of Certificate of Occupancy until the deficiency is paid, and if the escrow review fees are not paid within 30

days of the billing date, the Township shall have the right to lien the property in the amount of the deficiency.

TOWNSHIP OF TOMS RIVER

APPLICANT SIGNATURE

By _____
Board Secretary

Print Applicant's Name

OWNER'S SIGNATURE
(if applicant is not property owner)

Print Owner's Name

TOWNSHIP OF TOMS RIVER PLANNING BOARD

CORPORATE DISCLOSURE STATEMENT

NAME OF CORPORATION:

STATE OF NEW JERSEY:

COUNTY OF OCEAN : S. S.

_____, having been first duly sworn according to law, upon his/her oath, deposes and says:

1. I am the _____ of the above named Corporation. I am fully familiar with the facts concerning the names of the Stockholders and the percentage of the capital stock held by each stockholder in said Corporation as of the date of the application made before the Toms River Township Planning Board of which this Corporate Disclosure Statement constitutes a part.

2. The following information is submitted to the Toms River Township Planning Board, knowing that the Board relies upon the Truthfulness of the statements contained herein:

A.) NAME OF CORPORATION: _____

B.) REGISTERED AGENT OF CORPORATION:

C.) PRINCIPAL OFFICE OF CORPORATION:

D.) NAMES AND ADDRESSES OF OFFICERS AND DIRECTORS OF THE CORPORATION: _____

E.) NAMES AND ADDRESSES OF THE STOCKHOLDERS OF THE CORPORATION AND THE NUMBER OF SHARES OF CAPITAL STOCK OF THE CORPORATION ARE AS FOLLOWS: (LIST ONLY THOSE OWNING TEN PERCENT (10%) OR MORE OF CORPORATE STOCK):

BY: _____

DATE: _____

Sworn and scribed before me this _____
day of _____, 20 ____.

Notary Public of the State of New Jersey

TOWNSHIP OF TOMS RIVER PLANNING BOARD

PARTNERSHIP DISCLOSURE STATEMENT

NAME OF PARTNERSHIP: _____

STATE OF NEW JERSEY:

COUNTY OF OCEAN : S. S.

_____, having been first duly sworn according to law, upon his/her oath, deposes and says:

1. I am a Partner in the above named Partnership. I am fully familiar with the facts concerning this Partnership as of the date of the application made before the Toms River Township Planning Board of which this Partnership Disclosure Statement constitutes a part.
2. The following information is submitted to the Toms River Township Planning Board, knowing that the Board relies upon the Truthfulness of the statements contained herein:

A.) NAME OF PARTNERSHIP: _____

B.) REGISTERED AGENT OF PARTNERSHIP:

C.) PRINCIPAL OFFICE OF PARTNERSHIP:

D.) NAMES AND ADDRESSES OF PARTNERS AND PERCENTAGES HELD AS FOLLOWS:

BY: _____

DATE: _____

Sworn and scribed before me this _____
day of _____, 20 ____.

Notary Public of the State of New Jersey
