

**CHECKLIST FOR
DETERMINING COMPLETENESS OF APPLICATION
TOWN OF BOONTON
PLANNING BOARD**

An application for development shall not be considered complete until all the material and information specified below and specified on the appropriate checklist addendum applicable to the particular type of application has been submitted unless, upon receipt of a written request from the applicant, a specific requirement is waived by the municipal agency. The request for waiver shall accompany the application.

NAME OF APPLICANT: _____ **APP. NO.** _____

REQUIRED DATA & INFORMATION

C – COMPLETE I – INCOMPLETE NA – NOT APPLICABLE WR – WAIVER REQUESTED

	<u>C</u>	<u>I</u>	<u>NA</u>	<u>WR</u>
1. Completed application form in triplicate	()	()	()	()
2. Fees – Filing & Technical (See Sections 300-12 & 300-13)	()	()	()	()
3. Eighteen (18) black or blue on white prints of all maps	()	()	()	()
4. Eighteen (10) copies of all other documents	()	()	()	()
5. One (1) copy of this checklist completed by the applicant	()	()	()	()
6. Reverse line sepia and extra print if County Planning Board approval is required	()	()	()	()
7. All maps signed and sealed by appropriate NJ licensed or registered professional	()	()	()	()
8. Name of tract or development	()	()	()	()
9. Tax map sheet, block and lot numbers	()	()	()	()
10. Date prepared and dates of revision	()	()	()	()
11. Reference meridian	()	()	()	()
12. Graphic scale	()	()	()	()
13. Name, address, license number of person preparing plat or plan	()	()	()	()
14. Name and address of record owner	()	()	()	()
15. Name and address of applicant if other than owner	()	()	()	()
16. Certification that applicant is owner or authorized agent or that owner has consent to file under an option agreement	()	()	()	()
17. Certification from the Tax Collector that all taxes have been paid through most recent installment date	()	()	()	()
18. Names of owners of properties located within 200' of the tract	()	()	()	()
19. Separate application and fee filed for any conditional use or variance involved	()	()	()	()
20. Request for waivers attached, describing the nature and information for the requested waivers.	()	()	()	()

Signature of applicant or applicant's authorized representative

Date

TO BE COMPLETED BY AUTHORIZED PLANNING BOARD REPRESENTATIVE

APPLICATION DECLARED:

COMPLETE: _____ **DATE** _____ **AUTHORIZED SIGNATURE** _____

INCOMPLETE _____ **DATE** _____ **AUTHORIZED SIGNATURE** _____