

FEE: _____

REVIEW NO. _____

**LOCAL CLEARANCE
PLAN REVIEW**

DATE: _____

JURISDICTION: TOWNSHIP OF BORDENTOWN, BURLINGTON COUNTY

LOCATION: _____ NAME OF OWNER: _____

LOT NUMBER & SUBDIVISION: _____ TELE. NO. _____

LOT AREA: _____

(OR LEGAL DESCRIPTION)

ZONING DISTRICT: _____ MAP NO.: _____

PROPOSED USE: _____

ACCESSORY USES: _____

YARDS - FRONT _____ REAR _____ SIDE _____ ENCROACHMENTS _____

LOT COVERAGE (%): _____

OFF-STREET PARKING SPACES - REQUIRED: _____ PROVIDED: _____

LOADING SPACE: _____ HEIGHT: _____ SIGNS: _____

PLANNING BOARD APPROVAL: _____

BOARD OF ADJUSTMENT APPROVAL: _____

HEALTH DEPARTMENT APPROVAL (WHERE APPLICABLE): _____

D.E.P. APPROVAL (WHERE REQUIRED): _____

RIPARIAN CLEARANCE (WATER FRONT): _____

WET LANDS CLEARANCE (MARSH LAND): _____

INDIVIDUAL WELLS (WATER RESOURCES): _____

CAFRA (25 UNITS OR MORE): _____

SEWERAGE (50 UNITS OR MORE): _____

SOIL & SEDIMENT CONTROL: _____

OTHER (MUNICIPALITIES/STATE/FEDERAL) APPROVALS: _____

* NOTE: ATTACH COPY OF ALL REQUIRED DOCUMENTATION

ZONING OFFICER