

DEVELOPMENT REGULATIONS

102 Attachment 5

CHECKLIST NO. 5  
TOWNSHIP OF COLTS NECK  
CONDITIONAL USE APPLICATION

Application For: Preliminary Major Subdivision ( )  
Preliminary Major Site Plan ( )

Application No.: \_\_\_\_\_ Date Received  
By Board: \_\_\_\_\_

Project Name: \_\_\_\_\_

Applicant's Name: \_\_\_\_\_

Block (s): \_\_\_\_\_ Lot(s): \_\_\_\_\_

Latest Issue Date of Plat Cover Sheet: \_\_\_\_\_

NOTICE

**THIS FORM MUST BE COMPLETED AND RETURNED TO THE ADMINISTRATIVE OFFICER WITH THE SUBDIVISION OR SITE PLAN APPLICATION WHEN FILED. FAILURE TO INCLUDE ALL ITEMS REQUIRED ON SUBMITTED PLANS OR ATTACHMENTS MAY RESULT IN THE APPLICATION BEING CONSIDERED INCOMPLETE FROM A SUBMISSION STANDPOINT AND CERTIFICATION AS A COMPLETE APPLICATION DENIED. TO BE CONSIDERED AT A REGULAR BOARD MEETING, ALL INFORMATION AND DOCUMENTS MUST BE RECEIVED BY THE BOARD A MINIMUM OF 10 WORKING DAYS PRIOR TO THE MEETING.**

FOR BOARD  
USE ONLY

TO BE CHECKED  
BY APPLICANT

	<u>Yes</u>	<u>No(*)</u>
( ) 1. Three copies of completed application, and checklist.	_____	_____
( ) 2. Required fee per § 102-15(**).	_____	_____
( ) 3. All information and documents required per § 102-11.	_____	_____
( ) 4. If subdivision or site plan approval is also involve, complete checklist, fees, documents and data required for each approval requested	_____	_____
( ) 5. Three copies of identification of information missing and reasons for not providing information at this time.	_____	_____

COLTS NECK CODE

- \* On a separate page list all items not provided, with appropriate ordinance reference, example: 102-39D or 102-39D(1)(a) and reasons for not providing required information at this time and when it will be provided.
- \*\* Reference in Colts Neck Township Development Regulations Ordinance.

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CERTIFICATION BY APPLICANT AND PERSON  
COMPLETING THIS FORM (Both must sign)

I (We) believe the above information is accurate, I (we) understand that "certification of the application as complete" determines the commencing of the applicable time period for action by the approving authority and understand that certification of the application for time period purposes does not mean that all applicable ordinance requirements have been met or that all required information, data and/or documents required for approval of the application have been received or that any waivers have been granted.

Signed: \_\_\_\_\_  
Applicant

Date: \_\_\_\_\_

\_\_\_\_\_  
Person preparing the check list

Date: \_\_\_\_\_