

**Green Township Board of Adjustment**  
**APPLICATION**

**Part Two**

**(Application & Forms, as per Township Ordinance)**

**FOR OFFICIAL USE ONLY:**

Application #: \_\_\_\_\_ Escrow Account Number: \_\_\_\_\_  
Designation: \_\_\_\_\_ Related Application #(s): \_\_\_\_\_  
Date Filed: \_\_\_\_\_  
Date Deemed Complete: \_\_\_\_\_  
Hearing Date: \_\_\_\_\_  
Amount Application Fee Paid: \_\_\_\_\_  
Amount Escrow Fee Paid: \_\_\_\_\_  
Expiration Date: \_\_\_\_\_  
Expiration Date Extension From: \_\_\_\_\_ To: \_\_\_\_\_

**GREEN TOWNSHIP BOARD OF ADJUSTMENT  
REQUEST FOR A VARIANCE, APPEAL or INTERPRETATION  
FORM #1: APPLICATION**

**NOTICE:** The instructions for the completion of this application are shown below. Unless completed by the applicant as directed, the application will be declared incomplete and will not be considered by the Board of Adjustment.

I (We), \_\_\_\_\_  
(Name)

\_\_\_\_\_  
(Mailing Address & ZIP)

do hereby make a request for a  Variance,  Exception,  Appeal,  
 Interpretation from / of the provisions of Articles \_\_\_\_\_,  
Section(s) \_\_\_\_\_ of the Green Township Zoning Ordinance as to be permitted to

**1. The subject property or premises is commonly known as (street number & name) \_\_\_\_\_ being Tax Block \_\_\_\_\_ Lot Number \_\_\_\_\_ in the \_\_\_\_\_ zone.**

2. Owner's Name: \_\_\_\_\_  
Address \_\_\_\_\_  
Phone \_\_\_\_\_ E-mail: \_\_\_\_\_

3. Engineer / Planner/ Architect's Name(s): \_\_\_\_\_  
Address \_\_\_\_\_  
Phone \_\_\_\_\_ E-Mail: \_\_\_\_\_

4. Attorney's Name \_\_\_\_\_  
Address \_\_\_\_\_  
Phone \_\_\_\_\_ E-Mail \_\_\_\_\_

**Property Description:**

5. Property is approximately \_\_\_\_\_ feet in frontage by \_\_\_\_\_ feet in depth, having \_\_\_\_\_ acres and \_\_\_\_\_ square feet in area and having \_\_\_\_\_ percentage occupied by buildings or Structures.

6. The building(s) proposed by this application will have the following property setbacks:

SETBACK	REQUIRED	EXISTING	PROPOSED
Front			
Rear			
Left Side			
Right Side			

Said building(s) will measure \_\_\_\_\_ feet front (wide) by \_\_\_\_\_ feet deep and will contain an area of \_\_\_\_\_ square feet above ground and timbers.

7. Has a previous application been filed or heard involving these premises? [ ] Yes [ ] No

If so, give date and decision of Board at that time \_\_\_\_\_  
\_\_\_\_\_

8. The "prevailing setback" of adjoining buildings, within the block is approximately \_\_\_\_\_ feet.

9. **I (We) do hereby certify that the facts presented in this application and all attached information hereto are correct and accurate.**

\_\_\_\_\_  
**(Applicant's Signature)**

\_\_\_\_\_  
**(Date)**

**GREEN TOWNSHIP BOARD OF ADJUSTMENT APPLICATION  
FORM #2:  
APPLICATION CHECKLISTS** (Page 1 of 3)

- Required for all variance applications, made pursuant to N.J.S.A. 40:55D-70C, (otherwise known as "BULK" variances or "C" variances) and all variance applications made pursuant to N.J.S.A. 40:55D-70D, (otherwise known as "USE" variances or "D" variances.)
- Required for all Interpretations of the Zoning Ordinance or Map, and appeals of decisions of the Zoning Officer / Administrative Officer relating to the Zoning Ordinance.

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

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

ADMINISTRATIVE REQUIREMENTS	Complete	Waiver Requested	Incomplete
1. Properly completed APPLICATION (20 copies)			
2. Plans, Maps and Construction Details as required (20 sets)			
3. Application Fee Statement <b>(FORM #8)</b> and Escrow Deposits Paid. Fees \$_____ Escrow Deposits \$_____ .			
4. Certification of Payment of Taxes and Liens by the Tax Collector <b>(FORM #3)</b>			
5. Site Inspection Authorization FORM <b>(FORM #8)</b>			
6. Compliance with Legal Notice requirements. <b>(Do not begin notification until application is Deemed Complete and/or placed on the agenda for Hearing. Required for all applications.) See Notice Instructions.</b>			
7. Proof of Publication			
8. Affidavit of Proof of Service <b>(FORM #11)</b>			
9. Corporation, Partnership or LLC <b>(FORM #7)</b> (if applicable)			
10. Affidavit of Ownership/ Authorization FORM <b>(FORM #6)</b>			
11. Copies of applicable approvals or applications to other agencies as may be required. (Septic permits, Sussex County Planning Board, Sussex County Soil Conservation District, Environmental Protection Agency, Department of Environmental Protection, Highlands, etc.) *			
12. A listing of all variance requests and waiver requests of zoning ordinance and miscellaneous design standards.			

\*Satisfaction of requirements from other agencies governing land use are independent and are not a pre-condition to completeness or approval but must be completed prior to the issuance of a building permit or certificate of occupancy.

<b>VARIANCE MAP REQUIREMENTS</b>	Complete	Waiver Requested	Incomplete
1. Show North arrow and scale (not less than 1":100')			
2. Title block including name of property owner (and developer if applicable)			
3. Name and address of applicant			
4. Name and address of preparer of the plan(s) submitted			
5. Certification of Accuracy (or Seal) by Preparer			
6. Date of preparation and each subsequent revision			
7. Tax map information showing block and lot numbers, and names of adjacent property owners within 200 feet			
8. Name of public street which provides access to property, including driveway(s) and parking areas			
9. Zone district and zone setbacks & yard requirements			
10. Metes and bounds of Lot(s), area and frontage			
11. Key map showing entire site and its relationship to surrounding areas with an outline of the 200' perimeter			
12. Area of and building envelope of entire site			
13. Locations of all existing and proposed building locations and other structures with all property line set-backs including those on adjoining properties			
14. Location of all wells and septic tanks and fields within 100 feet of subject property			
15. An approved septic permit for proposed new construction on unimproved lot or increase in the number of bedrooms			
16. Labeling of all property zones and use within 200'			
17. Road and access locations including type, size, width of Right of Way, paving materials, curbs, sidewalks, guide rails, retention basins, parking areas, etc.			
18. Location of drainage areas, wetlands, streams (incl. setback), utilities, Right of Way easements and connections			
19. Existing and proposed grades with notations of any unusual topography			
20. A table that shows all of the required, existing and proposed setbacks for structures and/or buildings			

<b>VARIANCE TYPE</b> (Circle as applicable)	"D" / USE	"C" / BULK	Appeal or Interpretation
<b>VARIANCE CHECKLIST</b>	Complete	Waiver Requested	Incomplete
1. Maps in conformance with the map checklist signed and sealed by an Architect, Engineer, Planner or Surveyor which provides sufficient information (structures, set-backs, lot area, location of adjoining structures, wells and septic systems, wetlands, streams, etc.) upon which a decision can be based.			
2. Street, ground level and aerial photographs of the subject property <u>and</u> the surrounding property so that the prevailing zoning and actual uses are clear.			
3. A description of the alternative uses for the property that were considered			
4. A well-reasoned statement or legal brief which clarifies why the "C" or "D" Variance should be granted and the special reasons or hardship that pertain to the subject property. Particular attention should be paid to relevant Township Ordinances, Master Plan, applicable case law and other New Jersey statutes.			
5. Architectural drawings of the proposed structure sufficient to determine the dimensions, style, and layout of the proposed property development. All plans must be signed and sealed by architect.			
6. A copy of the Tax Map showing the location of the subject premises and all properties within 200 feet including an outline of the 200 foot perimeter.			

<b>APPEAL CHECKLIST</b> (In addition to the Variance Checklist)	Complete	Waiver Requested	Incomplete
1. Any evidence in the form of documentation, forms, or correspondence which explain the nature of the appeal or interpretation.			
2. A statement or legal brief which clarifies the position of the applicant			
3. In case of an appeal from the decision of the zoning or other administrative officer, all documents that were submitted and considered to reach the decision.			

**GREEN TOWNSHIP BOARD OF ADJUSTMENT APPLICATION  
FORM #3:**

**PROPERTY TAX STATUS STATEMENT REQUEST**

To: Tax Collector  
Township of Green

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

Please provide a certification of taxes paid for:

Assessed Owner's Name: \_\_\_\_\_

Block \_\_\_\_\_ Lot \_\_\_\_\_

Street Address \_\_\_\_\_

\_\_\_\_\_

Please check with the Tax Collector if you may alternatively provide a printout of current tax payment(s) and if there are fees associated with providing said document and submit it with the application.

Signature \_\_\_\_\_

Print Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

\_\_\_\_\_

Phone ( \_\_\_\_\_ ) \_\_\_\_\_

**GREEN TOWNSHIP BOARD OF ADJUSTMENT APPLICATION  
FORM #4:**

**REQUEST FOR LIST OF PROPERTY OWNERS WITHIN 200 FEET  
OF PROPERTY AFFECTED BY APPLICATION BEFORE THE  
BOARD OF ADJUSTMENT**

To: Tax Assessor  
Township of Green

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

Please provide a certified list of property owners within 200 feet of  
Lot \_\_\_\_\_ in Block \_\_\_\_\_, pursuant to N.J.S.A. 40:55D-12 (c)  
and section 13-7 of the Green Township Revised General Ordinances.

Assessed Owner's Name: \_\_\_\_\_

**A fee of \$10.00 is required when requesting this certified list.**

Signature \_\_\_\_\_

Print Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

\_\_\_\_\_

Phone (\_\_\_\_\_) \_\_\_\_\_







**GREEN TOWNSHIP BOARD OF ADJUSTMENT APPLICATION  
FORM #6:**

**AFFIDAVIT OF APPLICANT**

State of New Jersey

County of Sussex

\_\_\_\_\_ of full age, being duly sworn according to law on oath deposed and says that all of the preceding statements contained in the application submitted herewith are true.

Sworn and Subscribed to before me this \_\_\_\_ day of \_\_\_\_\_, 20\_\_ .

\_\_\_\_\_  
Notary Public of New Jersey

\_\_\_\_\_  
Signature of Applicant



**AFFIDAVIT OF OWNERSHIP**

State of New Jersey

County of Sussex

\_\_\_\_\_ of full age, being duly sworn according to law on oath deposes and says that the owner resides at \_\_\_\_\_ in the County of \_\_\_\_\_ and the State of \_\_\_\_\_ and that he/she is the owner in fee of all that certain parcel of land situated in the Township of Green and known and designated as Lot No. \_\_\_\_\_ in Block No. \_\_\_\_\_ and that \_\_\_\_\_ is hereby authorized to make the within application or appeal.

Sworn and Subscribed to before me this \_\_\_\_ day of \_\_\_\_\_, 20\_\_ .

\_\_\_\_\_  
Notary Public of New Jersey

\_\_\_\_\_  
Signature of Owner



**GREEN TOWNSHIP BOARD OF ADJUSTMENT APPLICATION  
FORM #8:**

**SITE INSPECTION AUTHORIZATION FORM**

I hereby give permission for Green Township Municipal Agencies and their agents to come upon and inspect these premises with respect to this application for \_\_\_\_\_

\_\_\_\_\_

on Block \_\_\_\_\_, Lot \_\_\_\_\_ .

Applicant's Signature \_\_\_\_\_

DATE: \_\_\_\_\_

.....

**APPLICATION FEE STATEMENT**

I understand that my application fees will not be refundable, under any circumstances, including withdrawal of this application prior to hearing. Any unused escrow fees will be refunded.

Applicant's Signature \_\_\_\_\_

DATE: \_\_\_\_\_

**GREEN TOWNSHIP BOARD OF ADJUSTMENT APPLICATION  
FORM # 9:**

**PUBLICATION REQUIREMENTS**

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

New Jersey Herald  
P. O. Box 10  
Newton, NJ 07860

Attn: Legal Ads

To Whom It May Concern:

Please publish this legal notice and furnish me with proof of publication:

**BEGIN** \_\_\_\_\_

**Take notice that the undersigned has applied to the Green Township Board of Adjustment for permission to:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**(Samples):** ....to have a \_\_\_\_\_ sq. ft. addition to existing \_\_\_\_\_ sq. ft. deck, including stairs on rear of house, and any other applicable necessary variances. OR The new deck will be \_\_\_\_\_ ft. from the left side yard setback and \_\_\_\_\_ ft. is the required side yard setback. \_\_\_\_\_ sq. ft. will encroach within that \_\_\_\_\_ - foot side yard setback.

**A Variance is sought from Ordinance # \_\_\_\_\_, along with associated variances and waivers. The property is located at \_\_\_\_\_, also known as Block \_\_\_\_\_, Lot \_\_\_\_\_, as designated on the Green Township Tax Map.**

**A public hearing is scheduled for \_\_\_\_\_, \_\_\_\_\_ at the Municipal Building at 7:00 pm, 150 Kennedy Road, Tranquility, NJ. All persons interested in said hearing may be heard at said time and place. All maps and documents relative to application # \_\_\_\_\_ shall be on file and available for public inspection at least ten (10) days prior to the aforementioned hearing between the hours of 12 and 3 PM, Wednesdays and Fridays, in the Office of the Board Secretary.**

**Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**END** \_\_\_\_\_

*(Please modify, as needed)*

**GREEN TOWNSHIP BOARD OF ADJUSTMENT APPLICATION  
FORM# 10:**

**NOTICE OF PUBLIC HEARING**

To: \_\_\_\_\_  
\_\_\_\_\_

You are hereby notified that the undersigned has appealed to the Green Township Board of Adjustment as provided for by R.S. 40:D55D-1

**TAKE NOTICE** that the Green Township Board of Adjustment will hold a Public Hearing and will consider the application of: \_\_\_\_\_  
for a variance or special exception from the terms and provisions of the Zoning Ordinance as follows, or from action of the Zoning Official who Denied an application for the following, or for an interpretation of the Zoning Map or Ordinance, or other action as to permit the following (detail of relief sought):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

The applicant shall seek relief from the provisions of Chapter XXI, Section(s) \_\_\_\_\_ of the Zoning Ordinance of the Township of Green. Such other relief as may be required shall also be sought.

**The property is located at:** \_\_\_\_\_  
**and designated on the Tax Map as Lot # \_\_\_\_\_ in Block # \_\_\_\_\_, and located in a \_\_\_\_\_ zoning district of the Township of Green which is located within 200 feet of the property owned by you.**

**The Public Hearing will be held on \_\_\_\_\_ at 7:00 pm in the court / meeting room of the Green Township Municipal Building, located at 150 Kennedy Road, Tranquility, New Jersey 07879.**

All interested parties will be given an opportunity to be heard. At that time you have the right to appear and be heard in person or be represented by an attorney, and may present any objections you may have or make any statements thereon.

The application, maps, and other documents will be available at least ten (10) days prior to the Hearing, for inspection and review at the office of the Board of Adjustment located in Municipal Building between the hours of 8:30 am and 3:00 pm, Monday through Friday. For questions involving municipal action on this case, you may contact the Board Secretary directly.

\_\_\_\_\_  
(Name of Applicant)

\_\_\_\_\_  
(Address of Applicant)

This notice is sent to you as required by law.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

**GREEN TOWNSHIP BOARD OF ADJUSTMENT APPLICATION  
FORM #11:**

**AFFIDAVIT OF PROOF OF SERVICE OF NOTICE OF HEARING**

State of New Jersey

County of Sussex

\_\_\_\_\_ of full age, being duly sworn according to law upon his/her oath deposes and says:

That in accordance with the provisions of Title 40:44D-1, et seq. of the revised statutes, he/she served written notice of hearing (FORM #11) on all property owners within or outside the municipality whose property is located within 200 feet of any part of the property to be affected by this application or appeal, at least ten (10) days prior to the date set for the hearing by handing a copy thereof to said property owners, or by sending to said property owners a copy thereof by certified mail to their last known address as shown by the list secured from the Green Township Tax Assessor, and where required, a copy thereof to the Sussex County Planning Board, the Clerk of the adjacent municipalities, Commissioner of Transportation of the State of New Jersey, and the Director of the Division of State and Regional Planning.

Attached is a true list of said property owners served (FORM #5) and other required parties with their addresses, and stating the manner of service of said notice on each and a true copy of said Notice of Hearing (FORM #11).

\_\_\_\_\_  
Signature of Applicant

Sworn and subscribed to before me this \_\_\_\_\_ day of \_\_\_\_\_,  
20\_\_\_\_.

\_\_\_\_\_  
Notary Public of New Jersey

SEAL



**GREEN TOWNSHIP BOARD OF ADJUSTMENT APPLICATION  
FORM #12:  
FAR CALCULATIONS**

The FAR (Floor Area Ratio) calculation may be information necessary to determine the type or extent of relief being sought from the Board of Adjustment.

The calculation, applicable to the AR-5/2; R-1; R - 1.5; and RB zoning districts, is as follows:

“Total permitted floor area = 2600 sq. ft. + (1700 sq. ft. x acreage of the lot).”

Block: \_\_\_\_\_ Lot: \_\_\_\_\_ Zone: \_\_\_\_\_

Location: \_\_\_\_\_

Acreage of lot: \_\_\_\_\_ acres

Acreage x 1700: \_\_\_\_\_ sq. ft.

+ 2,600 sq. ft.

= \_\_\_\_\_ sq. ft. total permitted floor area

Total applicable floor area of all applicable structures:

Existing: \_\_\_\_\_ sq. ft.

Existing to be removed: \_\_\_\_\_ sq. ft.

Proposed to be added: \_\_\_\_\_ sq. ft.

Proposed total: \_\_\_\_\_ sq. ft.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date