

**MOUNT OLIVE TOWNSHIP  
PLANNING BOARD**

**USE VARIANCE / SITE PLAN**

(Revised January 2016)

The completed application package, together with applicable forms and required fees, must be submitted to the Board Secretary in order for your case to be scheduled.

A complete application shall include:

1. General Information – Page 1
2. Request for Variance – Pages 2 & 3
3. Affidavit – Page 4: This form must be signed by the owner of the property and the applicant. No other person may make application to the Planning Board, except the owner or person under contract to purchase the premises without a legal Power of Attorney.
4. Certificate of Paid Taxes: Page 5: Fill in the top portion and submit to the Tax Collector's office for verification of payment of taxes.
5. Certificate of Ownership: Page 6: If the applicant represents a corporation or partnership, this form must be completed and submitted with the application package.
6. W-9 Form: Last page (Require Birth Date and Social Security Number)

The applicant is required to submit the original plus three (3) copies of the completed application and fifteen (15) full size black line prints and twelve (12) reduced copies to the Board Secretary along the two (2) checks made payable to "Mount Olive Township". (See attached fee schedule) One check is a Township application fee. The second will be deposited in an escrow account to cover any engineering, planning, legal and other expenses associated with review of submitted materials. Any money remaining in the escrow account after the application has been acted upon will be returned to the applicant.

NOTE: Any application which requires the testimony of a licensed professional planner must have a written report from the planner on file with the Planning Department at least two weeks prior to the date of the workshop meeting.

After application has been deemed complete and given an application number the following is required of the applicant:

- Applicant must obtain from the Tax Assessor's office a list of all adjoining property owners within 200 feet of the subject property.
- Notice of hearing – At least **ten days PRIOR** to the public meeting, the applicant is required by law to service written notice on the owners listed on the tax list. Notice should also be published in the official newspaper, **The Daily Record, 800 Jefferson Road, Parsippany, NJ 07054 FAX: 1-888-516-9470**. Complete and copy form. Original should be retained and given to Board secretary. (\*\*see below)
- Notice must be served by certified mail return receipt required, or personal delivery by obtaining property owners' full signature on the original tax list.
- After notifying all adjoining property owners, and publication of legal notice, applicant must complete the Affidavit of Service. It should be notarized and filed with the Board Secretary as proof of service. (\*\*see below)
- After completion of the above, the following items should be submitted to the Board Secretary to prove notice has been served properly:

- Original Notice to Adjoining Property Owners, completed and signed
- Original Affidavit of Service, signed and notarized
- Original list received from Tax Assessor or property owners within 200 feet
- All white (certified mail) slips
- Any green cards received back
- Verification from newspaper of publication of notice

Please note, that failure to fulfill any of the above requirements will result in application not being heard.

Please contact the Board Secretary (973) 691-0900 ext. 7310 with any questions you may have.

**MOUNT OLIVE TOWNSHIP FEE SCHEDULE  
AS PER SECTION 400-18 OF THE LAND USE ORDINANCE**

	<b>APPLICATION FEE</b>	<b>ESCROW FEE</b>
<b>"C" VARIANCE</b>		
RESIDENTIAL	\$100.00 per lot	Minimum of \$500.00 per lot
NON RESIDENTIAL	\$250.00 per lot	Minimum of \$750.00 per lot
<b>"D" VARIANCE</b>		
RESIDENTIAL	\$250.00 per lot	Minimum of \$1,500.00 per lot
NON RESIDENTIAL	\$500.00 per lot	Minimum of \$2,000.00 per lot
<b>SITE PLAN</b>		
PRELIMINARY (Residential)	\$500.00 set fee; \$75.00 per dwelling unit	\$2,000.00 plus \$150.00 per unit.
FINAL	\$500.00 set fee; \$50.00 per dwelling unit	\$1,500.00 plus \$50.00 per unit
COMBINED	\$800.00 set fee; \$100 per dwelling unit	\$3,000.00 plus \$150.00 per unit
<b>SITE PLAN</b>		
PRELIMINARY (Non residential)	\$400.00 set fee; \$100.00 per 1,000 sf of gross floor area	\$3,000.00, plus \$100.00 per 1,000 sf
FINAL (Non residential)	\$300.00 set fee; \$50.00 per 1,000 sf of gross floor area	\$2,000.00 plus \$50.00 per 1,000 sf
COMBINED (Non residential)	\$600.00 set fee; \$100.00 per 1,000 sf of gross floor area	\$4,000.00, plus \$100.00 per 1,000 sf
SITE PLAN REVISION / AMENDMENT / MISC.	\$400.00 minimum	\$1,000.00 minimum

## SITE PLAN CHECKLIST

Section 400-29 Mt. Olive Land Use Code

Please check the appropriate box

If any of the following details are omitted please submit an explanatory statement on page 3 under Design Waivers

### **PLAN PREPARATION** (400-29G)

- Scale of plan: 1 inch equals 10, 20, 30, 40 or 50 feet together with graphic scale.
- Person preparing plan / seal.
- Land surveyor certifying boundary or lot lines.
- One sheet showing overall development.
- Development name.
- Appropriate places for the signatures of the Planning Board Chairman & Secretary.
- A key map.
- Zoning district.
- North arrow.
- Date of original plan and each subsequent revision date.
- Total acreage of tract to one one-hundredths (1/100) of acre.
- Any existing / proposed streets / street names.
- Owner(s) signature on map.
- Existing / proposed contour lines at two-foot intervals inside the tract and within 50 feet of the tract's boundaries.
- Any existing / proposed streams or flood hazard areas pursuant to 400-18; 49-50 where applicable.
- Any easements or deed restrictions.
- Area dimensions / building locations showing conformity to zone district regulations such as but not limited to building area, lot lines, parking and loading spaces, setbacks, buffers and yards.
- The site in relation to all remaining contiguous lands in the applicant's or owner's ownership.

### **PLAN INFORMATION:** [400-29H(1)]

- Building & Use Plan: Size of building; height; location.
- Arrangements & use of all existing & proposed structures & signs.
- Existing & proposed total building coverage in acres or square footage.
- Percent of the lot coverage.
- Architect's scaled elevations of the front, side and rear of any structure & sign to be erected or modified to the extent necessary to apprise the Planning Board of the scope of the proposed work.
- Any existing structures on the site shall be identified either to remain or be removed.
- Written description of the proposed use(s) & operation(s) of the building(s), including number of employees or members of nonresidential buildings.
- Number of shifts to be worked and the maximum employees on each shift.
- Expected volume of trucks, deliveries, etc.
- Emission of noise, glare, vibration, heat, odor, air and water pollution.
- Safety hazards.
- Anticipated expansion plans incorporated in the building design.
- Floor plans shall be submitted where multiple dwelling units or more than one (1) use are proposed

**CIRCULATION PLAN: [400-29H(2)]**

- Show access streets & street names.
- Acceleration / deceleration lanes.
- Access points to public streets.
- Sight triangle (at intersecting streets, driveways).
- Traffic channelization.
- Easements.
- Fire lanes.
- Driveways & driveways within 100 feet of tract.
- Aisles & lanes.
- Curbs & curb cuts with ramps for handicapped persons.
- Number & location of parking & loading spaces.
- Parking for handicapped.
- Loading berths & docks.
- Pedestrian walks.
- Facilities for the movement & storage of goods, vehicles & persons on the site.
- Lighting plan & standards.
- Signs.
- Sidewalks shall be shown from each entrance/exit along expected paths of pedestrian travel.
- Access to parking lots, driveways, other buildings on the site & across common yard areas between buildings.
- Cross sections of new streets, aisles, lanes, driveways & sidewalks.
- Any expansion plans shall show feasible parking & loading expansion plans to accompany building

**FACILITIES PLAN: [400-29H(4)]**

The plans shall show the existing & proposed locations of each of the following:

- Drainage systems (Stormwater detention basin & drainage plan as well as details):
- Open space (conservation, recreation & common).
- Common property.
- Fire.
- Gas.
- Electric.
- Telephone.
- Sewerage & water line locations.
- Solid waste collection & disposal methods.
- Show proposed grades, sizes, capacities & materials to be used for facilities installed.
- Easements acquired or required on the tract and across adjacent properties.
- Legal document supporting the granting of an easement(s) by an adjoining property owner.
- Method of sanitary waste disposal.
- Proposed lighting including the direction, angle, height and reflection of each source of light.
- All utilities shall be installed underground.

**Other approvals which may be required:**

	<u>Date Plans Submitted</u>
Morris County Soil Conservation District	_____
Morris County Planning Board	_____
N.J. Department of Transportation	_____
N.J. Department of Environmental Protection	_____

**MOUNT OLIVE TOWNSHIP  
PLANNING BOARD  
USE VARIANCE / SITE PLAN APPLICATION**

PRELIMINARY                       FINAL                       COMBINED PREL. & FINAL

APPLICANT: NAME: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
TELEPHONE: \_\_\_\_\_ FAX: \_\_\_\_\_  
EMAIL: \_\_\_\_\_

NATURE OF APPLICANT

Corporation                       Partnership                       Individual                       Nonprofit

OWNER: NAME: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
TELEPHONE: \_\_\_\_\_ FAX: \_\_\_\_\_  
EMAIL: \_\_\_\_\_

ENGINEER/SUVEYOR: NAME: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
TELEPHONE: \_\_\_\_\_ FAX: \_\_\_\_\_  
EMAIL: \_\_\_\_\_

ATTORNEY: NAME: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
TELEPHONE: \_\_\_\_\_ FAX: \_\_\_\_\_  
EMAIL: \_\_\_\_\_

Relationship of the applicant to property is:

- Owner
- Purchaser Under Contract
- Lessee  (submission of lease/contract required)

How long has present owner had title to Property? \_\_\_\_\_

Has the applicant ever owner or presently own property contiguous to the subject property?

\_\_\_\_\_ Yes                      \_\_\_\_\_ No

If Yes: Block \_\_\_\_\_, Lot \_\_\_\_\_ Date Conveyed: \_\_\_\_\_

Has there been any previous appeal, request, or application to this or any other Township Board of Construction Official involving this property? \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, state case number, nature, date, and disposition of matter: \_\_\_\_\_

Are there any easements/deed restrictions affecting this property? \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, please describe: \_\_\_\_\_

**REQUEST FOR VARIANCE**

Application is hereby made for permission to (erect), (alter), (convert), (use) a \_\_\_\_\_ contrary to requirements of section \_\_\_\_\_ of the Land Use Ordinance.

Description of proposed improvement: \_\_\_\_\_

Does parcel adjoin State/County Road? \_\_\_\_\_

Are public water facilities available to this property? \_\_\_\_\_

Are public sewerage facilities available to this property? \_\_\_\_\_

Is there an EDU allocation for this property? \_\_\_\_\_

Present use (describe in detail with reference to each property & structure) \_\_\_\_\_

**LOCATION OF SUBJECT PROPERTY:**

Street address: \_\_\_\_\_

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

Area of lot/parcel in square feet: \_\_\_\_\_

**Zone:**

- RR-AA    R-3    R-5ML    L    C-1    L-I    FTZ-1
- RR-A    R-3SC    R-6    P    C-2    G-I    FTZ-2
- R-1    R-4    R-7    PB    CR-3    O-R    FTZ-3
- R-2    R-5    AR    PC-2    C-LI    M    FTZ-4

**JUSTIFICATION FOR VARIANCE**

“C” VARIANCE

Describe why the proposed improvement cannot conform to setback and/or height requirements of the zone district. Are there physical conditions on your property which prevent compliance with the zone district regulations?

---

---

---

---

“D” VARIANCE

Explain the special reasons under N.J.S.A. 40:55D-70d affecting this property which permit the use of this land and/or existing and/or proposed structure to be used for a use not permitted in this zone.

---

---

---

---

Explain in detail why the variance can be granted without substantial detriment to the public good and will not substantially impair the intent and purpose of the zone plan and zoning ordinance.

---

---

---

---

---

---

Design waiver(s): Identify and offer a brief description of each design waiver, if any,

---

---

---

---

---

---

AFFIDAVIT

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 \_\_\_\_\_ 2016

\_\_\_\_\_  
SIGNATURE OF APPLICANT

\_\_\_\_\_  
NOTARY PUBLIC

\_\_\_\_\_  
SIGNATURE OF OWNER

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 presentations 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 \_\_\_\_\_ 2016

\_\_\_\_\_  
SIGNATURE OF APPLICANT

\_\_\_\_\_  
NOTARY PUBLIC

\_\_\_\_\_  
SIGNATURE OF OWNER

I understand that the sum of \$\_\_\_\_\_ has been deposited in an escrow account (Builder's Trust Account). In accordance with the Ordinances of the Township of Mount Olive, I further understand that the escrow account is established to cover the cost of professional services including engineering, planning, legal and other expenses associated with the review of submitted materials and the publication of the decision by the Board. Sums not utilized in the review process shall be returned. If additional sums are deemed necessary, I understand that I will be notified of the required additional amount and shall add that sum to the escrow account within fifteen (15) days.

\_\_\_\_\_  
DATE

\_\_\_\_\_  
SIGNATURE OF APPLICANT

\_\_\_\_\_  
SIGNATURE OF OWNER

**TOWNSHIP OF MOUNT OLIVE PLANNING BOARD**  
**CERTIFICATE OF PAID TAXES**

OWNER: \_\_\_\_\_ Phone #: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

TITLE & LOCATION OF

PROPERTY: \_\_\_\_\_

\_\_\_\_\_

Block # \_\_\_\_\_ Lot # \_\_\_\_\_ Zone \_\_\_\_\_ # of Lots \_\_\_\_\_

Tax Sheet # \_\_\_\_\_

Description of Subdivision:

Minor - # of Lots \_\_\_\_\_

Sketch - # of Lots \_\_\_\_\_

Prel. - # of Lots \_\_\_\_\_

Final - # of Lots \_\_\_\_\_

\_\_\_\_\_

**FOR OFFICIAL USE ONLY**  
**TAXES OF RECORD 2016 YEAR**

\_\_\_\_\_

FIRST QUARTER \_\_\_\_\_

SECOND QUARTER \_\_\_\_\_

THIRD QUARTER \_\_\_\_\_

FOURTH QUARTER \_\_\_\_\_

THE TAX COLLECTOR OF MOUNT OLIVE TOWNSHIP \_\_\_\_\_

CERTIFIES THAT THE ABOVE TAXES ARE PAID TO DATE.

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



**TOWNSHIP OF MOUNT OLIVE  
PLANNING BOARD**

**APPLICATION #PB** \_\_\_\_\_

Notice to property owners and newspaper of appeal and/or application please take notice that the undersigned has filed an appeal or application for development with the Township of Mount Olive Planning Board for a \_\_\_\_\_ variance from the requirements of the Land Use Ordinance so as to permit \_\_\_\_\_ on premises known as

\_\_\_\_\_ Block \_\_\_\_\_ Lot \_\_\_\_\_ on the tax map of the Township of Mount Olive. In addition to the above approvals, applicant requests that the application be deemed amended to include any additional approvals, variances, exceptions or waivers determined to be necessary in the review of processing this application, whether requested by the Board or otherwise.

A public hearing has been scheduled for \_\_\_\_\_ 2016, at 7:00 p.m. in the municipal building, 204 Flanders-Drakestown Road, Budd Lake, New Jersey at which time you may appear, either in person or by attorney, and present any objections or comments you may have regarding this matter. Any maps or documents for which approval is sought shall be on file and available for public inspection in the offices of the Planning Department between the hours of 8:30 a.m. to 4:30 p.m. This notice is sent to you by the applicant, by order of the Planning Board.

DATED: \_\_\_\_\_  
\_\_\_\_\_ APPLICANT

-----  
**FOR NEWSPAPER INFORMATION ONLY**

APPLICANT	NAME _____
INFORMATION	ADDRESS _____
(Please Print	_____
Clearly)	(ADDRESS WHERE AFFIDAVIT SHOULD BE MAILED)
	TELEPHONE _____

(IN CASE OF QUESTIONS REGARDING THIS AD)

**Public Notices for The Daily Record: FAX 1-888-516-9470 Phone: 1-800-398-8993**

**AFFIDAVIT OF SERVICE**

State of New Jersey:

County of \_\_\_\_\_:

\_\_\_\_\_ of full age, being duly sworn according to law, on his oath deposes and says that he resides at \_\_\_\_\_ in the (municipality) \_\_\_\_\_ of \_\_\_\_\_ County of \_\_\_\_\_ and State of \_\_\_\_\_ and that he did on \_\_\_\_\_, 2016 at least ten (10) days prior to hearing date, give personal notice to all property owners within 200 feet of the property affected located on \_\_\_\_\_, Block \_\_\_\_\_, Lot \_\_\_\_\_. Said notice was given either by handing a copy to the property owner, or by sending said notice by certified mail. Originals of registered receipts, both white and green, if returned are attached hereto.

Notices were also served upon: (check if applicable)

- 1. The Clerk of Township of Mount Olive
- 2. Morris County Planning Board
- 3. The Director of the State Planning Commission
- 4. The Department of Transportation
- 5. Morristown Daily Record

In addition, attached hereto are:

- 1. Copy of said notice
- 2. List of owners of property within 200 feet of the affected property who were served, showing the lot and block numbers of each property as same appear on the Municipal Tax Map.
- 3. Proof of publication of notice in the official newspaper of Mount Olive.

\_\_\_\_\_  
(Signature of Applicant)

Sworn and subscribed to  
Before me this \_\_\_\_\_  
Day of \_\_\_\_\_ 2016

\_\_\_\_\_  
(A Notary Public of the State of New Jersey)