

BRIDGEWATER TOWNSHIP SPECIAL LAND USE APPLICATION

Name of Proposed Project _____
 Common Description of Property & Address (if issued) _____
 Applicant's Name _____ Phone (s) _____
 Address _____ City _____ Zip _____
 Complete Legal Description of Property: Attached Included on Site Plan Land Acreage _____
 Tax Parcel Identification #'s _____
 Existing Zoning _____
 Existing Use _____
 Proposed Special Land Use under Zoning Ordinance Section _____
 Proposed Use: Attach a detailed narrative description of the proposed use and how it will meet or exceed the ordinance Review Standards and Criteria for all Special Land Uses and the specific ordinance requirements for the proposed use, including any Off-Street Parking and Loading and Screening and Landscaping requirements.

Required Site Plan Attached **NOTE:** Application will not be accepted without required Site Plan

Firm or Individual who prepared site plan (s)
 Name _____ Phone _____
 Address _____
 City _____ State _____ Zip _____
 Contact Person _____ Title _____

Legal Owner(s) of property

(All persons having legal or financial interest in the property must sign this application)

Name _____ Phone _____
 Address _____
 City _____ State _____ Zip _____
 Contact Person _____ Title _____
 Signature _____ Interest in the Property _____
 Name _____ Phone _____
 Address _____
 City _____ State _____ Zip _____
 Contact Person _____ Title _____
 Signature _____ Interest in the Property _____

I do hereby swear that all the statements, signatures, descriptions and exhibits submitted on or with this application are true and accurate to the best of my knowledge and that I am authorized to file this application and act on behalf of all owners of the property.

Signature of Applicant _____ Date _____

Office Use Only

Date Received _____ By: _____ Fee Paid \$ _____
 Site Plan Submitted 12 copies (Do Not accept application without Site Plan)
 Planning Commission: First Introduction Date _____ Public Hearing _____
 Planning Commission Action: Approved Approved with Conditions Denied
 Date _____
 CASE # SLU _____