$Monmouth \ County \ Planning \ Board$

HALL OF RECORDS ANNEX ONE EAST MAIN STREET FREEHOLD, NEW JERSEY 07728-1255 Phone, 732.431.7460 Fax, 732.409.7540 Web Site: www.visitmonmouth.com



FILE NUMBER

SITE PLAN APPLICATION FORM

Municipality	Project Name	
Applicant	Name of Person and	
Address	Firm preparir	ıg plan
Telephone		
Owner	Telephone _	
(if other than applicant) Address	Attornev	
	Telephone	
Indicate which Municipal Agency that plans have b	een filed with:	
□ Planning Board □ Board of Adjustment	t Construction Official	□ Other
Tax Map: Block(s)	Lot(s)	
Location: (Road, intersecting roads, between what	at roads?)	
Site Plan Address:		
Zone Existing use	Proposed	JSE
Area of tractIf residential,	indicate number of dwelling units	Gross density
Area of building (square feet): Existing	Proposed	Total
Number of buildings Area	of each	
Number of parking spaces: Existing	Proposed	Total
Impervious Area: Existing	Proposed	Total
Number of employees: Existing	Proposed	Total
Hours of operation: Starting time	Quitting time	
Signature of applicant or agent		Date
The review period will not commence until the completed Monmouth County Development Re		
Checks or Money Orders shall be made payable	e to the County of Monmouth. C	ash will not be accepted.
State, county and municipal governments and and inspection fees.	quasi-governmental entities are	exempt from the payment of application fees
	Do Not Write Below This Line	

REVIEW FEE PAID

Amount ____

_____ Date Received ____

Received By