

**TOWN OF BELVIDERE
PLANNING BOARD
APPLICATION FOR INFORMAL DISCUSSION**

Date Filed: _____ Application Fee Paid\$ _____

Scheduled Hearing Date: _____ Review Deposit Paid\$ _____

Above for Office Use Only

FEE: \$500.00

SECTION I. APPLICANT HEREBY REQUESTS AN INFORMAL DISCUSSION FOR:

- | | |
|--------------------------------------|--|
| <input type="checkbox"/> SUBDIVISION | <input type="checkbox"/> CONCEPT PLAN APPROVAL |
| <input type="checkbox"/> SITE PLAN | <input type="checkbox"/> ZONING OR SUBDIVISION VARIANCE RELIEF |
| <input type="checkbox"/> VARIANCE | <input type="checkbox"/> USE VARIANCE RELIEF |
| <input type="checkbox"/> OTHER | <input type="checkbox"/> CONDITIONAL USE APPROVAL |

SECTION II.

1. Name of applicant: _____ Phone: _____
2. Address of applicant: _____
3. Name of owner of premises: _____
Address: _____
4. Premises subject of this application are known as _____ and are shown as Block _____ and Lot _____ of the Town of Belvidere Tax Maps.
5. Location of premises, neighborhood name and street address _____
6. Name of subdivision or development (if any) _____
7. The area of the lot as of the date of this application is _____ acres/square feet
8. The total number of lots resulting from this subdivision _____
9. Area of largest lot proposed _____ acres/square feet; Area of smallest lot proposed _____ acres/square feet.

SECTION 11. (CONT)

- 10. The zone district in which the premises is/are located is _____
- 11. Existing use(s) now located on premises is/are _____
- 12. Proposed use(s) of premises is/are _____
- 13. Does the owner or applicant now own or have any interest in any other property which adjoins the subject premises? YES NO
If yes, list: Block# _____ and Lot# _____
- 14. Have the premises been the subject of previous action by the Planning Board () or Board of Adjustment () ? (If yes, please attach either a copy of the applicable resolution or action or describe the ultimate disposition of the application.)

- 15. Are there any existing or contemplated easements, covenants, deed restrictions, etc. which apply to the premises? YES NO
- 16. What is the total floor area of all new buildings proposed _____
(Please attach copies) _____ square feet.
- 17. How many parking spaces are required pursuant to Ordinance _____
How many are proposed? _____
- 18. If this application is for zoning variance relief, has a decision been rendered or an order issued by the Construction Official? YES NO
Date of Decision of Order _____
- 19. Are any portions of the premises effected by a flood hazard areas as classified by F.I.A. Flood Hazard Boundary Maps? YES NO
- 20. List all maps and other exhibits submitted with this application _____

SECTION III. CERTIFICATION BY APPLICANT:

The undersigned applicant does hereby certify that all of the statements contained in the application are true.

Dated: _____

Signature of Applicant

NOTE: Applicant may attach a separate sheet of paper to this application for expanding any answers to any of the above questions.

CERTIFICATION BY TAX COLLECTOR

I hereby certify that, as of the date of the within application, no real property taxes are due and remain unpaid on the property which is the subject of the within application.

Date

Tax Collector

CERTIFICATION BY THE SEWER UTILITY CLERK

I hereby, certify that, as of the date of the within application, no sewer charges are due and remain unpaid on the property which is the subject of the within application.

Date

Sewer Utility Clerk