

BOROUGH OF ANDOVER

137 Main Street Andover, New Jersey 07821 973-786-6688 – office 973-786-7231 – fax

www.andoverboroughnj.org email: clerk@andoverboroughnj.org

PLANNING / ZONING BOARD APPLICATION FOR SITE PLAN WAIVER

The undersigned applicant hereby requests a public meeting with the Planning/Zoning Board in order to establish the necessary site plan review requirements in connection with an application for site plan waiver.

Applicant Name:				
Home Address:				
Phone #:	Email:			
Property Owner Name (if different):				
Property Owner Address:				
Property Owner Phone #:				
*Applicants who file under an LLC or Corporation must have an attorney present with them at their hearing as per NJSA 40:55D				
Address of Application:				
Block	Lot		Zone	
Existing Use: Proposed Use:				
Any Proposed C	hanges to property?	YES	NO	
Any Signage Cha	anges or Additions?	YES	NO	
Any Anticipated Outdoor Display/Storage?		YES	NO	
Applicant Signature:			Date:	
 Meetings are held on the 3rd Monday of the month beginning at 7 p.m. Work Session / Meeting date is by arrangement with the Board Secretary. 				
(Office Use Only)	Certification of Taxes	s Paid	YES s paid to d	NO late prior to hearing
 A fee of \$500 must accompany application in two checks: \$400 escrow – check # \$100 non-refundable administrative fee - check # 				