VILLAGE OF NEWARK <u>APPLICATION FOR APPEARANCE BEFORE THE PLANNING BOARD</u>

APPLICANT'S NAME:	
ADDRESS:	
TELEPHONE:	(W)(H)
Agent's Name:	Firm:
Address:	Phone:
PROPERTY OWNER'S NAME:	
ADDRESS:	Phone:
LOCATION OF PROPERTY (Address:)	
NEAREST INTERSECTION:	·
SIZE OF PROPERTY (in acres):	
SECTION, BLOCK & LOT NUMBER:	
TAX ACCOUNT NUMBER:	ZONED:
SECTION(S) OF CODE APPLICABLE T	O APPLICATION:
RESUBDIVISION & SITE PLAN A SITE PLAN APPROVAL (prelim ENVIRONMENTAL IMPACT STATE SPECIAL PERMIT RECOMMENDATION TO ZONING E IS THIS THE FIRST TIME THIS APPLICANT'S SIGNATURE:	PPROVAL (preliminary and/or final) APPROVAL (preliminary and/or final) minary and/or final) EMENT (E.A.F. draft or final) BOARD OF APPEALS PLICATION HAS BEEN MADE? IF NO WHEN? DATE:
	CIAL USE
DATE:	RECEIVED BY:
	CHECK CASH
DATE: FER	E RECEIVED BY: