TOWNSHIP OF HARDWICK SOIL REMOVAL/IMPORTATION APPLICATION

SECTION 1 - GENERAL INFORMATION

APPLICANT
Name
Address
Telephone No/Fax No. E-mail address
The applicant is a Corporation (); Partnership (); Individual (); Other (please specify):
The relation of the applicant to the property in question is: Lessee () Purchaser () Under contract (); Other (please specify):
OWNER
Name
Address
Telephone No/Fax No. E-mail address
ENGINEER/SURVEYOR
Name
Address
Telephone No/Fax No.
E-mail address
ATTORNEY
Name
Address
Telephone No/Fax No.
E-mail address

SECTION 2 - TYPE OF APPLICATION (CHECK)

INITIAL APPLICATION ()	RENEWA	L ()	
SECTION 3 - INFORMATION REGARDING THE PROPERTY			
A. Address of Property:			
B. Block(s):	ot(s):		
C. Use of Property:			
Existing:			
Proposed:			
D. Zone:			
E. Acreage of Entire Tract:			
F. Acreage of Area Proposed for Filling:			
G. Is the subject property located on a:			
Township Road County Road State Road Within 200 feet of a municipal boundary	Yes () Yes () Yes () Yes ()	No() No() No() No()	
H. Was the property subject to a prior appli	cation? Yes ()	No ()	
I. Approval from NJDEP for stream encro			
	Vec ()	No()	

J. Are there any e ways or other of		osed deed restriction	s, easements	, right-of-
			Yes ()	No ()
If yes, attach a	copy.			
K. Reason or state	d purpose for in	nportation activity.		
L. Improvements:	List all propos	ed on-site and off-tr	act improver	nents.
z. improvements.	Diot wii propos			
	· ·	nd date, maps and c	ther exhibits	s that
accompany this	s application.			
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SECTION 4 - INFO	RMATION RE	GARDING APPL	ICATION	
SOIL OR FILL MAT	ERIAL IMPOR	TATION (CHE	CK ALL TH	IAT APPLY)
Earth ()	Sand ()	Clay ()	Loam ()	Gravel ()
Humus ()	Rock ()	Topsoil ()	Masonry/Co	oncrete ()
Dirt of any Kind ()	Brick/Fragments ()		Asphalt Mil	lings ()
Quarry Process ()	Dredging Mate	erials ()	Dirt of any	Kind ()
Brick ()				
` /	\ /			

Cubic yards to be Imported:

Roads to be used for travel to and from the	site:
Hours of Operation and Days of the Week:	
SECTION 5 - INFORMATION REGAR (Note: Where Soil or Fill Material is comin	
Address of Property:	
Municipality: Cour	nty:
OWNER (or Representative of Owner) Name Address	
Telephone No/Fax No. E-mail address	
State the source/origin of soil/fill material a	and reason for its removal:
Provide documentation from the soil or fill material imported is free of contaminants:	material supplier(s) certifying that the
Warren County Soil Conservation District	Date Approved:
	Date Denied:
	Not Applicable:
	110t Applicable.

SECTION 6 - AUTHORIZATION AND VERIFICATION

Certifi Filling		he will comply with Reclamation Plan or Soil
-	Signature	Date:
	, cert e. (applicant name or ag	ify that the statements contained in this application gent)
	Signature	Date:
Owner	authorization for soil in	nportation in accordance with submitted plans.
_	Signature	Date: