

APPLICATION FOR SOIL REMOVAL PERMIT

Township of Wantage
Wantage, New Jersey 07461
(973) 875-7192

Three (3) Copies to be filed with Planning Board
or Zoning Board of Adjustment pursuant to Ch.23-1.7

Application date: _____

OWNER OF PREMISES: _____

ADDRESS: _____

_____ PHONE: _____

APPLICANT: _____

(name of individual, firm, corp., etc):

ADDRESS: _____

_____ PHONE: _____

(if corporation give PRESIDENT and SECRETARY)

Soil removal site: Block: _____ Lot: _____

Street: _____

Zoning classification of lands involved: _____

Location with regard to nearest intersecting street(s):

Person in charge of removal operation:

Address: _____

Telephone: Day: _____ Night: _____

Applicant's engineer: _____

Telephone: _____

Reason for soil removal: _____

Total volume of soil to be removed: _____

Total surface area to be disturbed: _____

Total estimated duration of removal operation: _____ (years)

Estimated removal by years:

1st _____

2nd _____

3rd _____

4th _____

5th _____

Total volume of topsoil to be stored on site and retained for respreading:

_____ c.y

Haul Route(s) to be used from pit to municipal boundary: _____

The location of haul roads in site including entrances, exits, ramp grades and requirements of Section 23-1.7 shall be shown on the soil removal maps prepared by a professional engineer.

Estimated number of vehicles, and type, to be parked overnight on the premises:

Estimated number of vehicular movements into and out of property on any single day:

Maximum number: _____ Average number: _____

List all other equipment or structures proposed be used on the site and the function of each:

Required: Twelve (12) copies of proposed site grading map as outlined in the municipal soil removal ordinance (Ch. 23-1.7(b)) prepared by licensed professional engineer.

A certification on the maps, indicating elevation of seasonal high water table pursuant to (Ch.23-1.7(k)) prepared by licensed professional engineer.

Evidence of public liability insurance \$100,000/\$300,000/\$50,000 (Ch.23-1.7(l))
(Policy or Certificate of Insurance)

Evidence of compliance with N.J.D.E.P. wetlands regulations (Ch.23-1.7(o))

PERMIT FEE: \$ _____ Signature of applicant: _____

DATE: _____

Signature of Applicant' Professional Engineer:

[Soil Removal Application - continued]

IF APPLICANT IS NOT THE OWNER OF THE LAND,
THE OWNER MUST COMPLETE THE FOLLOWING:

Name of Owner: _____

Address: _____ Tel. No.: _____

Block: _____ Lot: _____

Certification:

It is hereby certified that the undersigned is the owner of the premises upon which the proposed soil removal operation is to be conducted and is familiar with the details of said proposed operation and consents to the making of this application by the applicant. The undersigned further agrees that the soil removal operation to be conducted by the applicant shall be conducted in all respects in accordance with the applicable ordinance of the Township of Wantage.

(Owner)

(Owner)

(to be filled in by the Municipality)

Application approval date: _____ Board: _____
(Planning/Zoning)

Most recent revision of approved plans. Date: _____

Removal permit issued. Date: _____

Received: a) Fee: \$ _____ Date: _____

b) Site grading plan _____ Date: _____

c) High Water Table Plan _____ Date: _____

d) Bond for respreading topsoil, reseeding/replanting, drainage:

(1) Type of Bond: _____ Amount: _____

Date: _____

e) Public Liability Insurance Co.: _____

Policy Number: _____

Policy Amount(s): _____

f) Certificate of taxes paid: _____