PLANNING BOARD APPLICATION GUIDELINES

Please use these guidelines in order to submit a complete Planning Board Application.

1. Fill out the Planning Board Application in its entirety.
2. Applications must be accompanied by the application fee and escrow fee as calculated based on the proposed work being done. Using the Application Fee Schedule on page 14, please show how you calculated your fee amounts. We accept exact amount cash, credit card (in person) or a check (made out to the Township of Mahwah). *Note that the Township of Mahwah does not accept wire transfers or other electronic payments.* ***Any request for a wire transfer or other electronic payment is a scam.***
3. The attached Contact Info Sheet and the W9 Form must be filled out and signed for the deposit and management of escrow and/or guarantees. Please be sure to provide the required email addresses.
4. Please provide a summary of the proposed work as an addendum to the application.
5. ***A signed Highlands Plan Conformance Form is required for completeness.***
6. Please submit an electronic copy of each submission document, including the application and all associated materials such as reports, plans, plats, surveys and maps, etc. These can be sent to the Planning Board Secretary, copying the Administrative Officer.
7. Please submit any prior approvals/resolutions related to the property.
8. Please confirm that all tasks listed on Item #15 on page 8, have been completed.
9. If the property has multiple owners, please include the information on page 5 of the application for each owner.
10. Page 16 is Verification of Taxes paid. You may obtain this information from the Tax Department in the Municipal building. If you need further information, you may call the Tax Department at (201) 529-5757 ext. 226.
11. Pages 17 & 18 must be filled out even if the premises are not Historic.
12. Please consider the new requirements for Electric Vehicle Chargers & Tree Preservation.
13. Copies of referenced Township of Mahwah Ordinances can be obtained on the Township Website and at the Planning/Zoning/Property Maintenance Department.

Once your application is ready to be submitted, please make a complete hardcopy and PDF to retain for your records.

Submit only one Original Signed and Notary Sealed Application, along with one set of all the supporting materials such as plans, deeds, plats, maps, surveys etc. *The Administrative Officer will review the application for completeness. Once the review is complete, we will contact you with further instructions on how to submit the additional 15 sets of the complete application. Exceptions can be made for larger technical reports such as Stormwater Management etc., where a minimum of 5 signed sealed copies must be submitted.*

Thank you,
Planning and Zoning, Administrative Officer

CONTACT INFORMATION FOR ESCROW ACCOUNTS:

UNDER THE ESCROW ACCOUNTING LAW, THE TOWNSHIP PROFESSIONALS MUST SEND TO EACH APPLICANT AN INFORMATIONAL COPY OF ALL VOUCHERS/INVOICES FOR THEIR PROJECT, SUBMITTED TO THE TOWNSHIP. THIS IS TO BE DONE ON A MONTHLY BASIS.

PLEASE INDICATE IN THE SPACE BELOW THE NAME AND ADDRESS OF THE PERSON YOU WANT COPIES OF THE MONTHLY CHARGES BY THE TOWNSHIP PROFESSIONAL SENT TO:

NAME:

_____

ADDRESS:

_____

EMAIL:

_____

PHONE:

_____

THE ATTACHED W-9 FORM MUST BE COMPLETED AND SIGNED. PLEASE KEEP IN MIND THAT THE ESCROW ACCOUNT WILL BE CREATED USING THE ENTITY INFORMATION (INDIVIDUAL OR BUSINESS) AS LISTED ON THE W-9. ANY REMAINING ESCROW BALANCES WILL BE RETURNED TO THIS SAME ENTITY. ***PLEASE BE SURE TO PROVIDE THE REQUESTED EMAIL.***

DOCKET NO**.** _____ (TOWNSHIP TO ASSIGN)

**EMAIL ADDRESS REQUIRED: _____

Form **W-9**
(Rev. October 2018)
Department of the Treasury
Internal Revenue Service

Request for Taxpayer Identification Number and Certification

▶ Go to *www.irs.gov/FormW9* for instructions and the latest information.

Give Form to the requester. Do not send to the IRS.

Print or type. See Specific Instructions on page 3.

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.

2 Business name/disregarded entity name, if different from above

3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only **one** of the following seven boxes.

☐ Individual/sole proprietor or single-member LLC ☐ C Corporation ☐ S Corporation ☐ Partnership ☐ Trust/estate

☐ Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ _____

Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is **not** disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.

☐ Other (see instructions) ▶

4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):

Exempt payee code (if any) _____

Exemption from FATCA reporting code (if any) _____

(Applies to accounts maintained outside the U.S.)

5 Address (number, street, and apt. or suite no.) See instructions.

Requester's name and address (optional)

6 City, state, and ZIP code

7 List account number(s) here (optional)

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN,* later.

Note: If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number

___ - ___ - ____

or

Employer identification number

__ - _____

Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
3. I am a U.S. citizen or other U.S. person (defined below); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign Here | **Signature of U.S. person** ▶ | **Date** ▶

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to *www.irs.gov/FormW9.*

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-INT (interest earned or paid)
- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, *later.*

Cat. No. 10231X Form **W-9** (Rev. 10-2018)

APPLICANT: _____

APPLICATION SUBMISSION CHECKLIST
FOR THE
MAHWAH PLANNING BOARD

	YES	NO
1. Appropriate Fees (show calculations)	_____	_____
2. Completed Application Form	_____	_____
3. Applicant's Affidavit Signed By Each Owner & Notarized	_____	_____
4. Owner's Affidavit Signed By Each Owner & Notarized	_____	_____
5. Subdivision and/or Site Plan with all Ordinances requirements, and required number of maps (Maps must be folded)	_____	_____
6. Attach list of Variances and Waivers Requested	_____	_____
7. Attach completed Historic Preservation Form	_____	_____
8. Attach Verification of Taxes Form	_____	_____
9. Completed Highlands Plan Conformance Form	_____	_____

Applicant will be notified within forty-five (45) days on completeness of application.

_____

Planning Board, Administrative Officer

DEEMED COMPLETE: _____ INCOMPLETE DATE(S): _____

DATE(S) APPLICATION RECEIVED: _____

DATE(S) FOR COMPLETENESS: _____

NOTICE TO ALL APPLICANTS

Application must be accompanied by application fee, escrow fee & W-9 to establish an escrow account. NO application will be accepted without the proper fees.

FILING FEE $ _____

_____
DOCKET NUMBER

ESCROW DEPOSITS $ _____

TOWNSHIP OF MAHWAH
DEVELOPMENT APPLICATION

ZONE _____

_____
Date(s) Application Received
By Administrative Officer

1. Applicant Name: _____

   Address: _____

   Phone # _____ Email _____

2. Record Owner of Property: _____

   Address: _____

   Phone # _____ Email _____
   AFFIDAVIT OF OWNER ATTACHED GRANTING PERMISSION TO APPLY:
   YES ___ NO ____

3. If Applicant is a Corporation, Name and Address of President and Secretary and Legal Counsel Representing Corporation:

   Name/Title: _____

   Address: _____

   Phone # _____ Email _____

4. Name and Address of Legal Counsel (If provided)

   Name/Title: _____

   Address: _____

   Phone # _____ Email _____

5. Property Identification: Block(s)_____ Lot(s)_____ Tax Map Page No. _____

   Street Address: _____

   The property is situated on the (North, East, South, West) side of _____

   Street/Ave/Road and is approximately _____feet from_____.
   (Nearest Intersection)

6. Name, Address, Phone Number, Email and License Number of Persons Preparing Plat or Exhibits. Include Professional Engineer, Architect, Land Surveyor, Planner, Realtor or Other Expert.

Name: _____	Name: _____
Professional Type: _____	Professional Type: _____
Address: _____	Address: _____
Phone: _____	Phone: _____
Email : _____	Email : _____
Name: _____	Name: _____
Professional Type: _____	Professional Type: _____
Address: _____	Address: _____
Phone: _____	Phone: _____
Email : _____	Email : _____

7. TYPE OF APPLICATION
   a. Subdivision
      _____ Minor
      _____ Prel/Major
      _____ Final/Major
      _____ Prel/Final Combined
   b. Site Plan
      _____ Preliminary
      _____ Final
      _____ Prel/Final Combined
   c. Amended or Minor Change ____
   d. Conditional Use _____
   e. Planned Development _____

8. List of All Variances and Waivers
   _____
   _____
   _____
   _____
   _____

9. TOTAL SITE AREA (ACRES) _____

10. SQUARE FEET OF PROPOSED BUILDING(S) TO BE CONSRUCTED OR ENLARGED
    _____

11. IF SUBDIVISION, NUMBER OF NEW LOTS TO BE CREATED: _____
    IF A RESUBDIVISION, NUMBER OF ORIGINAL LOTS _____
    AND PROPOSED NEW LOTS _____

12. PRESENT USE OF PROPERTY _____

13. PROPOSED USE OF PROPERTY _____

14. ARE THERE ANY EXISTING OR PROPOSE COVENENTS, DEED RESTRICTIONS, PREVIOUS VARIANCES OR EXEMPTIONS FOR THE PROPERTY?
    _____NO _____YES, IF YES, ENCLOSE APPROPRIATE COPIES.

IF APPLICATION REQUIRES APPROVAL BY BERGEN COUNTY PLANNING BOARD, SOIL CONSERVATION, OR OTHER MUNICIPALITY, STATE OR FEDERAL AGENCIES, INDICATE DATES OF SUBMISSION, ACTION TAKEN BY AGENCY ETC.

_____
_____
_____
_____

15. ATTACHED HERETO ARE THE FOLLOWING ITEMS (✓ all included items)
    a. ☐ Original Application including one (1) full-sized set of all pertinent Preliminary and Final Site Plan Maps, Subdivision Plats, Surveys etc. ***All full-sized plans must be folded to a size no larger than 11 x 14***. Once an application is deemed complete, submission of the additional 15 application packets will be required, including the complete application, all full-size plans (folded to a size no larger than 11 x 14) and a reduced size copy (11 X17, folded to 8½ x 11).
    b. ☐Appropriate Fees as Provided in Fee Schedule (please show calculations).
    c. ☐Submit digital copies of the application documents, plans, reports etc.
    d. ☐If Applicant is a Corporation or Partnership, List All of the Stockholders or Partners Owning 10% or More in Interest
    e. ☐Historic Preservation Form Properly Filled Out.
    f. ☐Highlands Plan Conformance Form
    g. ☐Preliminary Soil Application (if required)
    h. ☐Copy of any Agreement or Conditional Contract Related to this Application.

_____ (print name), Being Duly Sworn According to Law, I hereby certify that the information presented in this Application is true and accurate.

_____
Signature of Owner, Agent or Representative (Specify)

Sworn and Subscribed Before Me This _____Day of _____, 20_____

_____
NOTARY PUBLIC OF NEW JERSEY
ATTORNEY AT LAW OF NEW JERSEY

AFFADAVIT OF OWNER IF OTHER THAN THE APPLICANT

_____BEING OWNER OF RECORD OF THE PROPERTY AS SET FORTH IN THIS APPLICATION, HEREBY CONSENTS TO THE FILING OF APPLICATION THIS _____DAY OF _____, 20_____ AND TO IMPLEMENTATION OF SECTION 22-3.4(i) AND/OR 26-3.2(g), WHICH ESTABLISHES LIENS FOR UNPAID FEES.

_____
SIGNATURE OF OWNER

SWORN AND SUBSCRIBED BEFORE ME THIS _____DAY OF _____, 20____

_____
SIGNATURE OF PERSON AUTHORIZED TO TAKE OATHS

OUTLINE FOR NOTICE TO BE PUBLISHED IN OFFICIAL NEWSPAPER OF THE TOWNSHIP OF MAHWAH – (THE RECORD)

TOWNSHIP OF MAHWAH
PLANNING BOARD

PLEASE TAKE NOTICE that _____
(Applicant's name)

Has made application to the Mahwah Planning Board for _____
(Type of application)

The public hearing will be held on the _____day of _____ 20_____.

At: 7:30 p.m. in the Mahwah Municipal Building, 475 Corporate Drive, Mahwah, NJ 07430.
(Place of hearing, address and time)

The application is for: (Describe the application, variances and waivers requested)
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____

For premises located at: _____
(Address, Block(s) and Lot(s))

In addition to the foregoing, the applicants will also seek any and all other variances, waivers, deviations or exceptions the Board deems to be required.

The application and related maps are on file and available for inspection at the Planning Board Office, 475 Corporate Drive, Mahwah, New Jersey 07430, during normal business hours, 8:00 am to 4:00 pm. Any interested party may appear at the scheduled hearing.

Date: _____ Applicant: _____

AFFIDAVIT OF SERVICE

State of New Jersey:

County of Bergen:

_____ of full age, being duly sworn according to law, on his/her oath deposes and says that he/she resides at _____ in the (municipality) of _____ County of _____, and State of _____ and that he/she did on _____ 20_____, at least ten (10) days prior to hearing date, give personal notice to all property owners within 200 feet of the property affected by:
Docket # _____ located at _____.

Said notice was given either by handing a copy to the property owner, or by sending said notice by Certified Mail. Copies of the registered receipts are attached hereto.

Notices were also served upon:
(Check what is applicable)

( ) 1. The Clerk of the (municipality) of _____.
( ) 2. County Planning Board
( ) 3. Director of the Division of State and Regional Planning
( ) 4. Department of Transportation
( ) 5. Clerk of Adjoining Municipalities

A copy of said notices are attached hereto and marked "Exhibit A". Notice was also published in the official newspaper of the municipality as required by law.

Attached to this affidavit and marked "Exhibit B" is a list of owners of property within 200 feet of the affected property who were served, showing the lot and block numbers of each property as same appear on the municipal tax map, and also a copy of the certified list of such owners prepared by the Tax Assessor of the Township of Mahwah, which is marked "Exhibit C".

There is also attached a copy of the proof of publication of notice in the official newspaper of the Township of Mahwah which is marked "Exhibit D".

_____
(Signature of Applicant)

Sworn and subscribed to
Before me this _____
Day of _____
20_____.

TOWNSHIP OF MAHWAH
DETERMINATION OF COMPLETENESS CHECKLIST
PRELIMINARY MAJOR SUBDIVISION

Project Title: _____
Block(s): _____Lot(s): _____

Docket Number:_____

NUMBERED ITEMS ARE AS PER SECTION 26-5.2b OF THE MAHWAH CODE

ITEM	YES	NO	N/A	COMMENTS
(1) Date and Revision Box	___	___	___	_____
(2) Key Map	___	___	___	_____
(3) Complete Title Block Information including Signature and Seal of Plan Preparer	___	___	___	_____
(5) Property Owners within 200 feet	___	___	___	_____
(6) Zone Boundaries	___	___	___	_____
(7) Required Survey Data	___	___	___	_____
(8) Reference to Covenants and Deed Restrictions and Easements	___	___	____	_____
(9) Distance measure along the Right-Of-Way Lines to nearest Intersections With other Streets	___	___	___	_____
(10) Location of Existing Buildings And Structures	___	___	___	_____
(11) Complete Storm Drainage Information	___	___	___	_____
(12) Show Existing/Proposed Contours which are referred To U.S.C. and G.S. datum	___	___	___	_____

ITEM	YES	NO	N/A	COMMENTS
(13) Location of Significant Existing Features including Flood Plains And Wetlands	___	___	___	_____
(14) Roadway Cross-Section and Profiles	___	___	___	_____
(15) Location of Sanitary Sewer and Water Facilities	___	___	___	_____
(16) Detailed Drainage Calculations 500 Feet Radius Drainage Map	___	___	___	_____
(17) Acreage of Tract and Area of all Lots	___	___	___	_____
(19) Other Pertinent Information	___	___	___	_____
a) Preliminary Soil Movement Application	___	___	___	_____
b) Topography within 200 Feet Radius	___	___	___	_____
c) Soil Erosion and Sediments	___	___	___	_____
d) Denote Waivers and Variances	___	___	___	_____
e) Separate List of Waivers and Variances	___	___	___	_____
f) Location of Zoning Setback Lines	___	___	___	_____

Additional Comments:

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

PLANNING BOARD
TOWNSHIP OF MAHWAH
DETERMINATION OF COMPLETENESS CHECKLIST
SITE PLAN

Project Title: _____
Block(s): _____ Lot(s): _____

Docket No. _____

NUMBERED ITEMS ARE AS PER SECTION 22-5.1.b OF THE MAHWAH CODE

ITEM	YES	NO	N/A	COMMENTS
(1) Complete Title Block Information Signature and Seal of Plan Preparer	___	___	___	_____
(3) Key Map	___	___	___	_____
(5) Property Owners Within 200 Feet	___	___	___	_____
(6) Zone Boundaries	___	___	___	_____
(7) Required Survey Data	___	___	___	_____
(9) Location of Existing Buildings And Structures	___	___	___	_____
(11) Plans and Elevations of Proposed Buildings	___	___	___	_____
Lot Coverage and Improved Lot Coverage Calculations	___	___	___	_____
(12) Sign Location and Details	___	___	___	_____
(13) Complete Storm Drainage Information Soil Erosion Control Plan and Details	___	___	___	_____
(14) Existing/Proposed Contours Referred to U.S.C. and G.S.	___	___	___	_____
(15) Location of Significant Existing Features	___	___	___	_____

ITEM	YES	NO	N/A	COMMENTS
(16) Roadway Cross-Section and Profiles	___	___	___	_____
(18) Traffic Controls and Improvements	___	___	___	_____
(19) Location of Parking Areas	___	___	___	_____
(20) Location of Sanitary Sewer and Water Facilities	___	___	___	_____
(21) Lighting Plan and Details	___	___	___	_____
(22) Landscaping Plan	___	___	___	_____
(23) Detailed Drainage and Retention Detention Calculations 500 Feet Radius Drainage Map	___	___	___	_____
(24) Location of Zoning Setback Lines	___	___	___	_____
(25) Construction Details List of Waivers and/or Variances Requested	___	___	___	_____
(26) 200 Feet Radius Topographic Map	___	___	___	_____
Preliminary Soil Movement Application	___	___	___	_____

Additional Comments:

_____

_____

_____

_____

_____

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_____

_____

TOWNSHIP OF MAHWAH
PLANNING BOARD

APPLICATION FEE SCHEDULE*

SITE PLAN:	**PRELIMINARY**	**FINAL**
MULTI-FAMILY RESIDENTIAL	**FEE:** $50.00 FOR EACH PROPOSED DWELLING UNIT	**FEE:** $10.00 PER UNIT MAX $1,000.00
NON-RESIDENTIAL	**FEE:** $300.00 - PLUS $25.00 FOR EACH 1,000 S.F. OF GROSS FLOOR AREA	**FEE:** $1,000.00
FOR ONE OR MORE EXCEPTIONS TO SITE PLAN REGULATIONS	**FEE:** $50.00 PER EXCEPTION (MAXIMUM OF $300.00)	
AMENDED SITE PLAN APPLICATION	**FEE:** $250.00	
EXTENSION OF SITE PLAN APPROVAL	**FEE:** $600.00	
SUBDIVISION:	**PRELIMINARY**	**FINAL**
MAJOR	**FEE:** $500.00, PLUS $100 FOR EACH PROPOSED LOT	**FEE:** $500.00
MINOR	**FEE:** $400.00	
AMENDED SUBDIVISION APPLICATION	**FEE:** $250.00	
EXTENSION OF SUBDIVISION APPROVALS	**FEE:** $100.00	
VARIANCE(S)	**FEE:** $300.00 PER VARIANCE (MAXIMUM OF $750.00)	
ESCROW ACCOUNT:	Refer to the Escrow Fee calculations within the Municipal Code on the Township's Website.	
TENANT APPLICATION PUBLIC HEARING	**FEE:** $100.00	
CONCEPTUAL REVIEW:	**FEE:** $250.00 - The conceptual review fee will be credited to a future application for the same site within two years.	
MAKE CHECKS PAYABLE TO:	THE TOWNSHIP OF MAHWAH	

*Application Fees are set by Township of Mahwah Municipal Code. For more details, refer to the entire code directly, not limiting your research to (21-3.4 Land Development Fees, 22-3.4 Site Plan Review Fees, 26-3.2 Subdivision Fees).

THE CERTIFIED LISTING OF ALL PROPERTY OWNERS WITHIN 200 FT. MUST BE OBTAINED BY THE APPLICANT FROM THE TAX ASSESSOR'S OFFICE.

THIS REQUEST SHOULD BE ACCOMPANIED BY A CHECK IN THE AMOUNT OF: TEN DOLLARS ($10.00)

PAYABLE TO: THE TOWNSHIP OF MAHWAH

AND SENT TO: TOWNSHIP OF MAHWAH
TAX ASSESSOR
475 CORPORATE DRIVE
MAHWAH, NEW JERSEY 07430

THE TAX ASSESSOR WILL FORWARD YOU THIS LISTING WITHIN SEVEN DAYS.

Township Of Mahwah

Municipal Offices: 475 Corporate Drive
P.O. Box 733 • Mahwah, NJ 07430
Tel 201-529-5757 • Fax 201-512-0537

Property Maintenance x 246

Board of Adjustment x 245

Zoning/Planning Board x 245

VERIFICATION OF TAXES PAID

DATE: _____

_____ BOARD OF ADJUSTMENT

_____ PLANNING BOARD

Pursuant to the Municipal Land Use Law:

This is to certify that taxes for the year(s) _____

are paid through the _____Quarter.

BLOCK_____ LOT(S)_____

Qualifier_____

OWNER OF RECORD: _____

PROPERTY LOCATION: _____

Ms. Kathryn Weber,
CTC Tax Collector

Township of Mahwah
Municipal Offices: 475 Corporate Drive
P.O. Box 733 Mahwah, NJ 07430
Tel 201-529-5757 Fax 201-512-0537

Board of Adjustment ex 243

Zoning/Planning Board ex 245

HISTORIC PRESERVATION COMMISSION

This Data Sheet is to provide known information to the TOWNSHIP OF MAHWAH HISTORIC PRESERVATION COMMISSION for use in reviewing and formulating recommendations to the Township on the subject application plan. The applicant is requested to fill in as much detail and to provide as much additional information as possible.

TITLE BLOCK

PROJECT NAME: _____ > PREPARED FOR:

_____ _____

TYPE OF PLAN: SITE SUBDIVISION > REGISTERED OWNER:
(CIRCLE)

OTHER _____ _____

> ADDRESS: _____

_____

Municipality: MAHWAH > PLAN PREPARED BY:

_____

County: BERGEN _____

State: NEW JERSEY > SCALE: _____

NAME OF APPLICANT/OWNER/REPRESENTATIVE
PREPARING THIS FORM: _____

TITLE:

(HISTORIC PRESERVATION COMMISSION USE ONLY)

REVIEW BLOCK:

DATE OF ORIGINAL PLAN: _____ HISTORIC SITE ON PROPERTY?
NO_____ YES _____

REVISION DATES REVIEWED: _____

DATES OF COMMISSION REVIEWS: _____

BACKROUND & SITE DESCRIPTION:

LIST ALL OFFICIALLY DESIGNATED HISTORIC SITES ON THE SUBJECT PROPERTY, IF KNOWN, AND INDICATE WHETHER THEY ARE CURRENTLY LISTED ON THE NATIONAL REGISTER OF HISTORIC PLACES (NRHP), AND/OR THE NEW JERSEY REGISTER(NJR), AND/OR THE MAHWAH REGISTER (MHSR).

LIST AND BRIEFLY DESCRIBE ALL NON-DESIGNATED STRUCTURES OR FEATURES ON THE SITE THAT ARE ESTIMATED TO BE FIFTY YEARS OF AGE OR OLDER.

EXAMPLES: BUILDINGS; FOUNDATION RUINS; WALLS; HAND-DUG WELLS; FISH WIERS; INDIAN SITES; CEMETERY SITES; ROADS OR TRAILS OF ANCIENT ORIGIN; STREAMS; PONDS OR OTHER WATER COURSES; ANY OTHER FEATURES THAT MIGHT BE OF HISTORIC INTEREST.

NAME AND BRIEFLY INDENTIFY, IF KNOWN, PROMINENT FORMER OF PRESENT OWNERS, RESIDENTS OR VISITORS:

LIST AND BRIEFLY DESCRIBE, IF KNOWN, ANY HISTORIC FEATURES OR SITES ON ADJACENT PROPERTIES, OR WITHIN 200' OR THE SUBJECT BOUNDERIES:

ALL INFORMATION PROVIDED BY THE UNDERSIGNED IS DEEMED BY THAT PERSON TO BE ACCURATE AND COMPLETE TO THE BEST OF THE UNDERSIGNES'S KNOWLEDGE AND BELIEF.

_____ _____

APPLICANT/OWNER OR AUTHORIZED REPRESENTATIVE

DATE

TOWNSHIP OF MAHWAH
LAND USE DEPARTMENT

HIGHLANDS PLAN CONFORMANCE FORM

An application cannot be deemed complete without conformance with Highlands Consistency Ordinance No. 2073[i]. An Applicant must comply by:

1. Submitting/Obtaining a Mahwah Highlands Exemption Approval. (The application is available on the Township's Planning and Zoning Forms and Applications webpage). (*If an exemption is met, a Highlands Consistency Review by the Mahwah Land Use Department (#2) is not needed*.)
2. Reviewing Section 32 of the Township Code (Ordinance 2073 – which is available on the Township Website), the Applicant must determine if the applicability requirements noted in 32-4.2 are met.
    a. If the applicability criteria of 32-4.2 are met, then the Applicant must meet the requirements of this Ordinance. It must be noted, going forward, that all Highlands Consistency Reviews are performed by the Township's Land Use Department. Therefore, nothing is required to be sent directly to the Highlands Council.
3. If the applicability criteria of 32-4.2 is not met and there is no applicable Mahwah Highlands Exemption, then nothing else is required for Highlands Plan Conformance.

I _____ (Please print name of Owner, Agent or Representative), attest that this application is in conformance with the Highlands Ordinance because: ***(Select 1, 2 or 3):***

☐ **1.** A Mahwah Highlands Exemption Determination Application has been submitted as part of the application. If so, please complete the following:
- Is the project located in the **Preservation Area** or **Planning Area?** (Please circle one)
- For Exemption #4 – Please list the certified parcel plans substantiating:
    - The existing improvements as of August 10, 2004 (Preservation Area) or September 4, 2013 (Planning Area) **&**
    - When the buildings/structures/impervious were constructed/created:

Plan Title	**Date**	**Last Revised Date**

☐ **2**. This Application meets the applicability criteria of 32-4.2 and will require a review by the Township's Land Use Department.

☐ **3**. This Application does not meet any Highlands Exemption criteria **AND** does not meet the applicability criteria of 32-4.2.

For ***all applications***, please provide:
- ☐ The Limit of Disturbance as depicted on a supporting plan is _____s.f./ _____Acre %.
- ☐ The increase in impervious coverage as depicted on a supporting plan is _____ s/f.

_____ _____
Signature of Owner, Agent or Representative (Specify) Date Signed

[i] Ordinance No. 2073 effective 12/15/25.