

Land Use Development Application Submission Checklist

Please review the LUB Instruction and Information Packet

Section A- *Pages 9-15 Completeness Checklist, and Maps/Plans/Surveys, etc. (if applicable) must be included in all copies of the application packets. Please make sure all required signatures and notarization are completed.*

1. ☐ Land Use Development Application- **pages 2-6**
2. ☐ Affidavit of Noncollusion- **page 7**
3. ☐ Ownership Disclosure Statement- **page 8** *If 100% ownership please indicate on form.*
4. ☐ **Completeness Checklist(s)** see Completeness Checklist: **Only include the applicable checklist(s).**

☐ "a" Variance (Appeal)	☐ Site Plan, Minor
☐ "b" Variance (Interpretation)	☐ Site Plan, Waiver
☐ "c" Variance (Bulk)	☐ Site Plan, Major Preliminary (Nonres or Res)
☐ "d" Variance (Use)	☐ Site Plan, Major Final (Nonres or Res)
☐ Build on Lot Not Fronting on Street	☐ Subdiv. or Site Plan, Informal Review
☐ Certificate of Nonconformity	☐ Subdiv. or Site Plan, Extension of Approval
☐ Subdivision, Minor	☐ Subdiv. or Site Plan, Amend. of Approved Plan
☐ Subdivision, Major Preliminary	☐ Other:
☐ Subdivision, Major Final	

Section B – *Pages 9-15 are for the original application only. (2) Two separate non-refundable checks for application and escrow fees are made payable to Willingboro Township. If all pages are not complete and submitted with the application, the application will be deemed incomplete.*

5. ☐ Agreement to Pay Fees- **pages 9-10**
6. ☐ Fee Calculation Worksheets- **pages 11-12**
7. ☐ W-9 – **page 13**

Section C

8. ☐ Request for List of Property Owners—**submit form directly to Clerks Department, along with check.** List must be current, within 30 days of hearing date **page 14**
9. ☐ Property Tax Certification, Sewer Tax & Fair Share Connection Fee Certification- **submit to Tax Collector-** when application is submitted to Board Secretary- **page 15**

The application, with supporting documentation, must be filed with the Township and must be filed with the Township and must be delivered to the Board Professional for review at least (15) fifteen business days prior to meeting at which the application is to be considered. A digital copy of the the completed must be submitted as well to the Board Secretary. Please contact the Board Secretary for Board Professional Contact & Mailing Address. Please review the Information and & Instruction packet for more information.



APPLICATION TYPE

- ☐ PLANNING
☐ ZONING

LAND USE DEVELOPMENT APPLICATION

Date Submitted	Application No.	App. Fee Ck#	Escrow Fee Check#
Block	Lot(s)	Tax Map	Zoning District
1. APPLICANT /DEVELOPER		2. OWNER	
NAME:		NAME:	
ADDRESS:		ADDRESS:	
CITY:	STATE:	ZIP:	CITY: STATE: ZIP:
PHONE:	FAX:	PHONE:	FAX:
EMAIL ADDRESS		EMAIL ADDRESS	
INTEREST IN PROPERTY:		<i>Complete this section if applicant is not the owner.</i>	

3. TYPE OF APPLICATION (check all that apply)

- | | |
|--|--|
| ☐ "a" Variance (Appeal) | ☐ Site Plan, Minor |
| ☐ "b" Variance (Interpretation) | ☐ Site Plan, Waiver |
| ☐ "c" Variance (Bulk) | ☐ Site Plan, Major Preliminary (Nonres or Res) |
| ☐ "d" Variance (Use) | ☐ Site Plan, Major Final (Nonres or Res) |
| ☐ Build on Lot Not Fronting on Street | ☐ Subdiv. or Site Plan, Informal Review |
| ☐ Certificate of Nonconformity | ☐ Subdiv. or Site Plan, Extension of Approval |
| ☐ Subdivision, Minor | ☐ Subdiv. or Site Plan, Amend. of Approved Plan |
| ☐ Subdivision, Major Preliminary | ☐ Other: |
| ☐ Subdivision, Major Final | |

4. APPLICANT'S ATTORNEY

5. APPLICANT'S ENGINEER

NAME:	NAME:
ADDRESS:	ADDRESS:
CITY: STATE: ZIP:	CITY: STATE: ZIP:
PHONE: FAX:	PHONE: FAX:
EMAIL ADDRESS	EMAIL ADDRESS

6. APPLICANT'S OTHER PROFESSIONALS (Architect, Planner, Surveyor, etc.)

NAME:	NAME:
ADDRESS:	ADDRESS:
CITY: STATE: ZIP:	CITY: STATE: ZIP:
PHONE: FAX:	PHONE: FAX:
EMAIL ADDRESS	EMAIL ADDRESS

7. LOCATION OF PROPERTY

Street Address:	Block(s):
Zone:	Lot(s):
Type of Road Frontage _____ Highway, County Road, Local Road	

8. LAND USE

Existing Land Use: _____
Proposed Land Use: _____

9. PROPERTY DETAILS

of Existing Lot(s): _____ # of Proposed Lot(s): _____
Existing Form of Ownership: ☐ Fee Simple ☐ Rental ☐ Condominium ☐ Cooperative
Existing Deed Restrictions or Easements: ☐ NO ☐ YES If yes, attach copies.
Proposed Deed Restrictions or Easements: ☐ NO ☐ YES If yes, attach copies.

10. UTILITIES (Check all that apply)

Existing:	☐ Public Water	☐ Private Well	☐ Public Sewer	☐ Private Septic System
	☐ Natural Gas	☐ Electric	☐ Propane	
Proposed:	☐ Public Water	☐ Private Well	☐ Public Sewer	☐ Private Septic System
	☐ Natural Gas	☐ Electric	☐ Propane	

11. ZONING SCHEDULE (complete all that apply)							
	Required	Exisiting	Proposed		Required	Exisiting	Proposed
Minimum Lot Requirements							
Area				Principle			
Width				Accessory			
Depth							
Principal Buildings & Structures				Maximum Lot & Building Coverages			
1 Side Yard				Lot			
2 Side Yard				Building			
Front Yard				Open Space Preserved			
Rear Yard				% of Tract			
Accessory Buildings & Structures				Is the proposed site on an inside corner lot? ☐ NO ☐ YES if, yes ☐ Inside ☐ Corner			
Side Yard							
Rear Yard							
12. PARKING & LOADING REQUIREMENTS							
# of Parking Space Required: _____				# of Parking Spaces Provided: _____			
# of Loading Space Required: _____				# of Loading Spaces Provided: _____			
13. OTHER APPROVALS REQUIRED							
U.S. Army Corps of Engineers				☐ NO ☐ YES			
N.J. Dept of Environmental Protection				☐ NO ☐ YES			
N.J. Dept of Transporation				☐ NO ☐ YES			
Burlington County Bridge Commission				☐ NO ☐ YES			
Burlington County Planning Board				☐ NO ☐ YES			
Burlington County Soil Conservation District				☐ NO ☐ YES			
Historic District				☐ NO ☐ YES			
State of NJ Sewer Extension				☐ NO ☐ YES			
State of NJ Stream Encroachment				☐ NO ☐ YES			
State of NJ Waterfront Development				☐ NO ☐ YES			
State of NJ Wetlands				☐ NO ☐ YES			
State of NJ Riparian Conveyance				☐ NO ☐ YES			
Other: _____				☐ NO ☐ YES			
Other: _____				☐ NO ☐ YES			
14.APPLICATION SUBMISSION MATERIALS (use additional sheets if necessary) Applicant is responsible for providing digital copies of application, plans, reports, exhibits, etc. to the Board Secretary:							
List all plans, reports, photos, etc. _____							

15. PREVIOUS OR PENDING APPLICATIONS (use additonal sheets if necessary)

List all previous or pending applications for this parcel. If current application is for the Amendment of a previously approved Subdivision or Site Plan, furnish a copy of the previously approved plan and describe the proposed amendments.

16. RELIEF REQUESTED (use additonal sheets if necessary)

List arguments for Variances, Waivers of Development Standards and/or Submission Requirements.

17. EXPERT WITNESS FOR APPLICANT

Name: _____	Type of Testimony: _____
Name: _____	Type of Testimony: _____
Name: _____	Type of Testimony: _____
Name: _____	Type of Testimony: _____

18. SIGNATURE OF APPLICANT

I certify that the foregoing statements and the materials submitted are true. I further certify that I am the individual applicant, or that I am an Officer of the Corporate applicant or a General Partner of the Partnership applicant and am authorized to sign the application for the Corporation or Partnership.

SWORN & SUBSCRIBED before me this
day of _____, 20_____

Signature (applicant) DATE

NOTARY

PRINT NAME

19. CONSENT OF OWNER

NOTE: If the property is owned by a corporation or an LLC this "consent of owner" must be signed by a corporate officer or managing member and a resolution must be attached authorizing that corporate officer/managing member to sign on behalf of the entity.

I certify that I am the Owner of the property which is the subject of this application. I hereby consent to the filing of this application and to the approval of the plans submitted therewith. I further consent to the inspection of the property in connection with this application as deemed necessary by the board and its professional staff.

I am aware that the Township will incur costs for professional review fees in the course of hearing and deciding this application. I am aware that the applicant has signed an escrow agreement that requires said applicant to be responsible to pay the Township for the costs incurred. By consenting to the filing of this application I agree that, in the event the applicant fails to pay all of those costs, I will be responsible to pay, and I will pay, any balance of those costs owed by the applicant to the Township. I further understand that if I fail to pay the amount owed the Township may seek and win a judgment against me for the amount owed plus counsel fees and costs and that that judgment may become a lien against my property.

SWORN & SUBSCRIBED before me this
day of _____, 20_____

Signature (OWNER)

DATE

NOTARY

PRINT NAME

20. DISCLOSURE STATEMENT

If applicant is a corporation, partnership or LLC please answer the following questions pursuant to N.J.S.A. 40:55D-48.1 & 48.2:

Is this application to subdivide a parcel of land into six (6) or more lots? ☐ NO ☐ YES

Is this application for a variance to construct a multiple dwelling unit of 25 or more units? ☐ NO ☐ YES

Is this application for approval of a site (or sites) for non-residential purposes? ☐ NO ☐ YES

If you responded YES to any of the above questions, Ownership Disclosure Statement must be completed.

Signature (APPLICANT/OWNER)

Date

21. SURVEY WAIVER CERTIFICATION

As of the date of this application, I hereby certify that the survey submitted with this application which is dated _____ shows and discloses the premises in its entirety, described as Block _____ Lot _____; and I further certify that no buildings, fences or other facilities have been constructed, installed or otherwise located on the premises after the date of the survey with the exception of the structures shown.

SWORN & SUBSCRIBED before me this
day of _____, 20_____

Signature (OWNER)

DATE

NOTARY

PRINT NAME

AFFIDAVIT OF NONCOLLUSION

STATE OF NEW JERSEY :
:
: S
:
COUNTY OF BURLINGTON :

_____ being duly sworn according to law upon his oath, deposes and says:
NAME OF APPLICANT

He/she is the applicant in connection with a property known as _____
STREET ADDRESS
Block _____ and Lot _____.

There has been no collusion between the applicant and any member of the Willingboro Township
PLANNING | **ZONING** Board , or any officials of Willingboro Township with respect to said application.
Circle one

SWORN & SUBSCRIBED before me this
_____ day of _____, 20____

NOTARY

SIGNATURE (applicant) DATE

PRINT NAME

OWNERSHIP DISCLOSURE STATEMENT

NAME OF CORPORATION, PARTNERSHIP OR LLC: _____

Listed below are the names and addresses of all owners of 10% or more of the stock/interest* in the above referenced corporation or partnership:

	NAME	ADDRESS
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		

*If a corporation or a partnership owns 10% or more of the stock of a corporation or 10% or greater interest in a partnership, that corporation or partnership shall list the names and addresses of its stockholders holding 10% or more of its stock or 10% or greater interest in the partnership, and this requirement shall be followed until the names and addresses of the non-corporate stockholders and individual partners exceeding the 10% ownership criterion established have been listed.

SWORN & SUBSCRIBED before me this

_____ day of _____, 20_____

NOTARY

SIGNATURE (applicant)

DATE

PRINT NAME

AGREEMENT TO PAY FEES

THIS AGREEMENT, made and entered on this _____ day of _____, 20__ by _____ and between the Township of Willingboro **PLANNING / ZONING** *CIRCLE ONE* Board (the Board) and _____ (the Applicant), is made upon the following terms and conditions:

AGREEMENT TO PAY FEES: Applicant hereby covenants and agrees to pay all charges and fees imposed by the Board in connection with the Board Application filed contemporaneously herewith. Such fees include but are not limited to application fees, attorney review fees, engineer review fees, planner review fees, court stenographer fees, copy costs and postage. The Board will not sign plans or deeds and will not release signed plans or deeds until all such charges and fees have been paid in full.

Notwithstanding the existence or terms of any partnership, joint venture, reimbursement or other agreement between the Applicant and one or more third parties, the individual or legal entity that signs this Agreement shall be solely and exclusively responsible for all fees chargeable to the Application filed contemporaneously herewith and to the project identified at the end of this Agreement.

1. **ESCROW DEPOSIT:**

- a. Two checks are to be submitted. One check for the non-refundable application fee and a second check for the escrow deposit. The Board hereby acknowledges receipt of an escrow deposit in the amount of \$_____. Said sum is to be placed in an escrow account to cover the cost of the aforementioned review fees. Such sum shall be charged periodically as fees and charges accrue. The balance of the escrow sum, if any, after all charges and fees have been paid shall be returned to the Applicant.
- b. Applications by individuals or business entities that owe, or business entities with one or more common principals of a business entity that owes an outstanding balance from a prior application will not be heard by the Board until the outstanding balance is paid in full. As used herein, the terms principal or common principal mean an individual or business entity that holds an ownership interest in both the applicant business entity and the debtor business entity.
- c. Whether the debt was incurred by the current owner, a previous owner or a previous applicant, if an outstanding balance remains unpaid on a previous application pertaining to this property, the Board will not hear a new application pertaining to this property or any portion of this property until the outstanding balance is paid in full.

2. **ADDITIONAL ESCROW:**

- a. The Escrow deposit is an estimate of the professional review fees that will be incurred (Engineering, Legal, Planning, Stenographic, etc.) by the Board to review the Application for Development. These Escrows are established on the basis of the Applicant submitting completed Applications and Plans in conformance with applicable Ordinance Provisions. Any further submissions required on behalf of the Applicant shall be deemed re-submissions, and the Applicant shall be required to post additional fees totaling 50% of the original escrow deposit for each plan submitted after the original submittal.

- b. If, as a result of the Applicant's failure to replenish the escrow account, the account contains insufficient sums to pay current plus anticipated additional review fees, the Board will not conduct further hearings on the application until the applicant replenishes the escrow account as directed. In addition, the Applicant's failure to replenish the escrow account will be deemed an extension of the Board's time to act on the application or, the Board may deny the application without prejudice.
- c. The municipal engineer shall not perform any inspection if sufficient funds to pay for that inspection are not on deposit.

3. CONTEST OF REASONABLENESS:

- a. The Applicant agrees to pay any additional sums required to pay charges and fees not covered by the initial escrow deposit within fifteen days after receipt of a billing by the appropriate Township Office. The Applicant understands and agrees to pay such sum notwithstanding any dispute as to the reasonableness of fees and charges. Payment shall not constitute a waiver of the right to challenge the reasonableness of charges and fees as set forth herein below.
- b. The Applicant agrees that the reasonableness of any fee or charge may be challenged pursuant to the procedure set forth in NJSA 40:55D-53.2a. The Applicant understands and agrees that the aforesaid procedure shall be the sole and exclusive method of challenging the reasonableness of charges and fees.

4. **REFUND OF MONEYS IN ESCROW ACCOUNTS:** When it has been determined that there is no longer any need to retain the Escrow Account, the Applicant shall be entitled to the return of any moneys which remains in the account. In accordance with the close-out procedure set forth in NJSA 40:55D-53.2d, the applicant shall send written notice by certified mail to the Chief Financial Officer, the Administrative Officer and the relevant municipal professional(s) that the application or the improvements, as the case may be, are completed and that a refund of any funds remaining in the Escrow Account is requested.

5. **COLLECTION:** Should the Applicant fail to pay any sum required to be paid hereunder when due, the Township shall be entitled to pursue all remedies at law or equity. Interest shall accrue at the rate of 18% per annum simple interest on all sums unpaid after the due date. The Township may collect a reasonable attorney's fee which shall not be less than \$300.00 should litigation for the purpose of collecting any sum be commenced.

IN WITNESS WHEREOF, the parties hereto have hereunto subscribed their hands on the date first above written.

APPLICANT:

Applicant's or Attorney Name (printed) (Applicant's or Attorney Signature)

If company is a corporation or LLC, signature must be attested by an attorney

Application: Block(s)_____ Lot(s): _____

TOWNSHIP OF WILLINGBORO

By:_____ (Secretary's Signature)

Fee Schedule Calculation Worksheet

Separate checks for the application and escrow shall be made payable to the
“Willingboro Township” must be submitted.

APPLICATION TYPE	APP FEE	APP FEE	ESCROW FEE	ESCROW
VARIANCES				
“a” Variance (Appeal)	\$100		\$1500	
“b” Variance (Interpretation) Map or Ordinance	\$50		\$500	
“c” Variance (Bulk)	\$100		\$500	
“d” Variance (Use)	\$100		\$1,500	
Build on Lot Not Fronting on	\$100		\$500	
VARIANCES TOTAL DUE				
NOTE: If an application requires more than one type of variance, the applicant shall pay the fees required for each type requested. For fee and escrow purposes all “c” variances requested shall be considered one variance request.				
MISCELLANEOUS				
Administrative Change of Use	\$50		\$125	
Certified List of Property Owners	.25¢ per name or \$10, whichever is more		N/A	
Conditional Uses	\$150		\$1,500	
Informal Review	\$50		See Note*	
Note: Applicant is responsible for all fee incurred by Professional with regards to a Informal Review				
MISCELLANEOUS TOTAL DUE				
SUBDIVISION PLANS				
Minor Subdivision Plan	\$100		\$500	
Preliminary Major Subdivision Plan	\$200		\$150/Lot, not less than \$1500	
Final Major Subdivision Plan	\$200		\$25/Lot, not less than \$1500	
Extension of Preliminary or Amended Subdivision Plan	\$100 original fee		\$500 original fee	
Revised Subdivision Plan	50% of original fee		50% of original	
SUBDIVISION PLANS TOTAL DUE				
PAGE 1 TOTALS				

Fee Schedule Calculation Worksheet- Page -2-

SITE PLANS				
Site Plan Waiver	\$100		\$500	
Minor Site Plan	\$200		\$1,500	
Preliminary Major Site Plan, Residential or Nonresidential	\$350		\$150/ acre, not less than \$1500	
Final Major Site Plan, Residential or Nonresidential	\$200		\$100/ acre, not less than \$1500	
Extension of Preliminary or Final Site Plan Approval	\$100		\$500	
Amended Site Plan	\$100		\$500	
Revised Site Plan	\$100		\$500	
SITE PLANS TOTAL DUE				
NOTE: Revised Site Plan fees shall be charged when development plans are classified as incomplete for any reason. Such fees shall not be required when revised plans are submitted in response to comments from Board members, Board professionals or members of the public during a hearing or to satisfy a Any other matter under the provision of Municipal Land Use Law for which no specific fee or escrow deposit established, the application fee is \$100.00, and the escrow amount is \$500. It is the applicant's responsibility to make sure all escrow are current.				
TOTAL DUE (From Page 1)				
TOTAL DUE (From Page 1)				
GRAND TOTAL	GRAND TOTAL APPLICATION FEE		GRAND TOTAL ESCROW	

**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.**

Before you begin. For guidance related to the purpose of Form W-9, see *Purpose of Form*, below.

Print or type. See Specific Instructions on page 3.	1 Name of entity/individual. An entry is required. (For a sole proprietor or disregarded entity, enter the owner's name on line 1, and enter the business/disregarded entity's name on line 2.)	
	2 Business name/disregarded entity name, if different from above.	
	3a Check the appropriate box for federal tax classification of the entity/individual whose name is entered on line 1. Check only one of the following seven boxes. ☐ Individual/sole proprietor ☐ C corporation ☐ S corporation ☐ Partnership ☐ Trust/estate ☐ LLC. Enter the tax classification (C = C corporation, S = S corporation, P = Partnership) Note: Check the "LLC" box above and, in the entry space, enter the appropriate code (C, S, or P) for the tax classification of the LLC, unless it is a disregarded entity. A disregarded entity should instead 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 Foreign Account Tax Compliance Act (FATCA) reporting code (if any) _____ (Applies to accounts maintained outside the United States.)
	3b If on line 3a you checked "Partnership" or "Trust/estate," or checked "LLC" and entered "P" as its tax classification, and you are providing this form to a partnership, trust, or estate in which you have an ownership interest, check this box if you have any foreign partners, owners, or beneficiaries. See instructions ☐	
	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. See also *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.

What's New

Line 3a has been modified to clarify how a disregarded entity completes this line. An LLC that is a disregarded entity should check the appropriate box for the tax classification of its owner. Otherwise, it should check the "LLC" box and enter its appropriate tax classification.

New line 3b has been added to this form. A flow-through entity is required to complete this line to indicate that it has direct or indirect foreign partners, owners, or beneficiaries when it provides the Form W-9 to another flow-through entity in which it has an ownership interest. This change is intended to provide a flow-through entity with information regarding the status of its indirect foreign partners, owners, or beneficiaries, so that it can satisfy any applicable reporting requirements. For example, a partnership that has any indirect foreign partners may be required to complete Schedules K-2 and K-3. See the Partnership Instructions for Schedules K-2 and K-3 (Form 1065).

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS is giving you this form because they

REQUEST FOR LIST OF PROPERTY OWNERS

Subject property must be identified by Block, Lot and Street Address. If the property contains multiple lots, list each lot separately. If the property is on multiple blocks, use separate lines for each block.

Street Address	Block	Lot	Lot	Lot

I do hereby request that the Tax Assessor compile and certify a list of Property Owners within 200 feet of the property described above. With this request, I hereby submit the required fee of \$10.00 or \$.25 per name, whichever is greater.

Requestor's Name: _____

Address: _____ Phone: _____

_____ E-mail: _____

Signature: _____ Date: _____

Note—All request and payment must be submitted to the Township Clerk's Office. Your request will be processed by the Tax Assessor within seven (7) calendar days of the filing of this form and payment of the required fees as required by N.J.S.A. 40:55D-12c. The seven (7) day-time period will begin on the day that this form and the required fee are received by the Tax Assessor.

Adjoining Municipalities—If the subject property is within 200 feet of an adjacent municipality, notice of your application must be served on the Clerk of that municipality. In addition, you must request a 200' list from the municipality and notice of your application must be served on the persons and entities whose names appear on that list.

OFFICE USE ONLY

Amount Paid: _____

Date Paid: _____

Cash/Check : _____

PROPERTY TAX, SEWER TAX & FAIR SHARE CONNECTION FEE CERTIFICATION

From:

Applicant's Name & Mailing Address

Property Information: Subject property must be identified by Block, Lot and Street Address. If the property contains multiple lots, list each lot separately. If the property is on multiple blocks, use separate lines for each block.

Owner's Name				
Street Address	Block	Lot	Lot	Lot

Property taxes for the above referenced block(s) and lot(s) are: ☐ CURRENT as of _____ ☐ DELINQUENT as of _____ Amount Due + Interest _____	Sewer taxes for the above referenced block(s) and lot(s) are: ☐ CURRENT as of _____ ☐ DELINQUENT as of _____ Amount Due + Interest _____ WMUA _____ Date: _____
_____ Willingboro Certified Tax Collector Date: _____	Fair Share Connection Fee(if applicable) for the above referenced block(s) and lot(s) are: ☐ CURRENT as of _____ ☐ DELINQUENT as of _____ Amount Due + Interest _____

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Payments must be made directly to the Tax Collector. Payments will not be accepted by the Planning or Zoning Board or the Clerk's Office.

No site plan approval, site plan waivers, subdivisions, variance, certification or declaration of completeness of application can be granted unless the applicant shall have fully paid any and all taxes due to the Township of Willingboro.

This form must be completed and presented by the applicant to the Board Secretary in order for the application to be placed on the Board's agenda. Payments must be kept current.