



# TOWNSHIP OF PLAINSBORO

Department of Planning and Zoning  
641 Plainsboro Road  
Plainsboro, NJ 08536  
609-799-0909 ext. 1502

**Form No. 1**  
File No. \_\_\_\_\_

## PLANNING/ZONING BOARDS

File \_\_\_\_\_  
(Applicant's name)

### DISPOSITION

Approved \_\_\_\_\_  
Approved with Conditions \_\_\_\_\_  
Disapproved \_\_\_\_\_  
Date Decision Published \_\_\_\_\_  
Planning Board \_\_\_\_\_

Date Application Received \_\_\_\_\_  
Date Application Complete \_\_\_\_\_  
Date of Public Hearing \_\_\_\_\_  
Extension of Time Granted \_\_\_\_\_  
Fee Collected \$ \_\_\_\_\_  
Date Collected \_\_\_\_\_  
Board of Adjustment \_\_\_\_\_

**(DO NOT WRITE ABOVE THIS LINE)**

### I. SCHEDULE

Pursuant to the Township of Plainsboro Municipal Code and applicable New Jersey State Law, application is made to the Township of Plainsboro for the following:

Check Applications(s) Requested	Type of Application	Fee \$	Check Applications Requested	Type of Application	Fee \$
<input type="checkbox"/>	1. Appeal of Administrative decision	<input type="checkbox"/>	<input type="checkbox"/>	9. Final Approval of Major Subdivision	<input type="checkbox"/>
<input type="checkbox"/>	2. Interpretation	<input type="checkbox"/>		Date of Preliminary Approval _____	
<input type="checkbox"/>	3. Bulk Variance	<input type="checkbox"/>	<input type="checkbox"/>	10. Preliminary Site Plan Approval	<input type="checkbox"/>
<input type="checkbox"/>	4. Use Variance	<input type="checkbox"/>	<input type="checkbox"/>	11. Final Site Plan Approval	<input type="checkbox"/>
<input type="checkbox"/>	5. Conditional Use	<input type="checkbox"/>	<input type="checkbox"/>	12. Minor Site Plan Approval	<input type="checkbox"/>
<input type="checkbox"/>	6. Classification of sketch plat	<input type="checkbox"/>	<input type="checkbox"/>	13. Concept	<input type="checkbox"/>
<input type="checkbox"/>	7. Approval of Minor Subdivision				
<input type="checkbox"/>	8. Preliminary Approval of Major Subdivision	<input type="checkbox"/>			
	Date classified as Major _____				
				<b>TOTAL FEE</b> _____	

### II. FOR VARIANCE ONLY

Check forms No. 2 through 5 for additional information.

### III. GENERAL DATA

Name of Applicant \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_  
Applicant Interest in property (owner, lessee, etc) \_\_\_\_\_  
When acquired \_\_\_\_\_  
Street Address of Property \_\_\_\_\_  
Tax Map Sheet \_\_\_\_\_ Block \_\_\_\_\_ Lot \_\_\_\_\_ Date filed with County Recorder \_\_\_\_\_

- Is the property served by a public sewer system? Yes \_\_\_\_\_ No \_\_\_\_\_
- Is the property served by a public water system? Yes \_\_\_\_\_ No \_\_\_\_\_
- Is applicant willing to dedicate land for the widening of roads in compliance with the Township and/or County Master Plan? Yes \_\_\_\_\_ No \_\_\_\_\_

Is the proposed use on a Municipal \_\_\_\_\_, County \_\_\_\_\_, or State \_\_\_\_\_ road?

Area of property \_\_\_\_\_ acres or \_\_\_\_\_ sq. ft. Frontage on an improved street \_\_\_\_\_ ft. No. of proposed lots \_\_\_\_\_  
 Present Zoning \_\_\_\_\_  
 Present Use of Property: \_\_\_\_\_ Proposed Use of Property: \_\_\_\_\_  
 Description of all present structures: \_\_\_\_\_  
 Number of proposed Buildings \_\_\_\_\_ Floor area of all structures \_\_\_\_\_ sq. ft.  
 Percentage of coverage by buildings \_\_\_\_\_ By impervious cover \_\_\_\_\_  
 Estimated Costs: Building \$ \_\_\_\_\_ Site Work \$ \_\_\_\_\_  
 Bulk Restrictions provided: Front Yard \_\_\_\_\_ Side Yard \_\_\_\_\_  
 Rear Yard \_\_\_\_\_ Height \_\_\_\_\_  
 Has a subdivision previously been granted? \_\_\_\_\_ Date \_\_\_\_\_  
 Has a variance previously been granted? \_\_\_\_\_ Date \_\_\_\_\_  
 Parking spaced required \_\_\_\_\_  
 Are there any existing or proposed covenants or deed restrictions on the property? \_\_\_\_\_  
 Explain \_\_\_\_\_

- Is a variance requested? \_\_\_\_\_
- Describe in detail section of zoning ordinance from which applicant seeks relief: \_\_\_\_\_

Other Data (ATTACH SHEET IF NECESSARY) \_\_\_\_\_

**IV. PLANS**

Attach list of all plans and other exhibits submitted, indicating names, address, license #, and phone numbers of preparer.

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**V. CERTIFICATION**

I hereby certify that the information and exhibits herewith submitted are true and correct to the best of my knowledge and that I am to file this application and act on behalf of the signatories of the above authorization. I further authorize Township Officials to inspect the site note above.

\_\_\_\_\_  
 Signature of Owner

\_\_\_\_\_  
 Date

\_\_\_\_\_  
 Signature of Applicant

\_\_\_\_\_  
 Title

Sworn to and subscribed before me this \_\_\_\_\_ day  
 of \_\_\_\_\_ 20\_\_\_\_.

Persons to be contacted regarding matters pertaining to this  
 application, if other than myself.

\_\_\_\_\_  
 Notary

Name \_\_\_\_\_

Phone \_\_\_\_\_

**AGREEMENT TO PAY FOR PROFESSIONAL REVIEW  
 Plainsboro Township**

Date \_\_\_\_\_

Applicants Address \_\_\_\_\_

Block \_\_\_\_\_ Lot \_\_\_\_\_

\_\_\_\_\_  
 Name of Developer

Agree(s) to pay for any professional review necessary  
 for the above construction.

Signed \_\_\_\_\_

Title \_\_\_\_\_

APPROVED  
PLAINSBORO TOWNSHIP PLANNING/ZONING BOARD

NUMBER \_\_\_\_\_

DATE \_\_\_\_\_

CHAIRMAN \_\_\_\_\_

SECRETARY \_\_\_\_\_



# TOWNSHIP OF PLAINSBORO

Department of Planning and Zoning  
641 Plainsboro Road  
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Form No. 14  
File No. \_\_\_\_\_

## PLANNING/ZONING BOARDS SITE PLAN REVIEW CHECK LIST

APPLICANT \_\_\_\_\_ ADDRESS \_\_\_\_\_  
TEL NO. \_\_\_\_\_ SITE LOCATION \_\_\_\_\_  
DATE \_\_\_\_\_ REVIEWED BY \_\_\_\_\_

- 
- |   |   |
|---|---|
| <input type="checkbox"/> 10 days prior to meeting   | <input type="checkbox"/> building dimensions  |
| <input type="checkbox"/> 17 copies of site plan (15 if Use or Bulk variances)             | <input type="checkbox"/> size location, rendering of existing and proposed signs on the tract and within 100' of tract                            |
| <input type="checkbox"/> application fee (see attached fee schedule)                      | <input type="checkbox"/> written descriptions, see ordinance §82-36B  |
| <input type="checkbox"/> agreement to pay for professional review                         | <input type="checkbox"/> floor plan   |
| <input type="checkbox"/> plans on proper size sheets                                      | <input type="checkbox"/> building elevations, each side   |
| <input type="checkbox"/> scale of plat  | <input type="checkbox"/> building material to be used   |
| <input type="checkbox"/> key map in relation to remainder of municipality & land owner    | <input type="checkbox"/> indicate buildings to remain   |
| <input type="checkbox"/> plan certified by licensed architect or engineer                 | <input type="checkbox"/> driveways  |
| <input type="checkbox"/> boundaries of tract, dimensions and bearings                     | <input type="checkbox"/> proposed circulation plan  |
| <input type="checkbox"/> north arrow  | <input type="checkbox"/> curbs  |
| <input type="checkbox"/> date   | <input type="checkbox"/> aisles & lanes   |
| <input type="checkbox"/> zone district  | <input type="checkbox"/> fire lanes   |
| <input type="checkbox"/> existing & proposed streets                                      | <input type="checkbox"/> loading areas  |
| <input type="checkbox"/> street names   | <input type="checkbox"/> loading berths & docks   |
| <input type="checkbox"/> existing contours at proper intervals                            | <input type="checkbox"/> pedestrian walks   |
| <input type="checkbox"/> proposed contours  | <input type="checkbox"/> facilities for movement and storage of goods   |
| <input type="checkbox"/> existing & proposed streams                                      | <input type="checkbox"/> location of exterior lighting  |
| <input type="checkbox"/> existing & proposed easements                                    | <input type="checkbox"/> location of exterior light standards, direction, reflection, intensity of lighting on the tract and within 100' of tract |
| <input type="checkbox"/> existing flood hazard elevations                                 | <input type="checkbox"/> cross sections of ___ streets ___ aisles ___ lanes ___ driveways   |
| <input type="checkbox"/> location of proposed buildings                                   | <input type="checkbox"/> existing & proposed wooded areas   |
| <input type="checkbox"/> location of existing buildings                                   | <input type="checkbox"/> buffer areas   |
| <input type="checkbox"/> location of proposed & existing signs                            | <input type="checkbox"/> landscape plan ___ species, caliper & location planting ___ seeded areas ___ sodded areas ___ grading                    |
| <input type="checkbox"/> total building coverage in acres                                 | <input type="checkbox"/> retaining walls  |
| <input type="checkbox"/> total building coverage in square feet                           | <input type="checkbox"/> fencing  |
| <input type="checkbox"/> percentage of lot covered by buildings                           | <input type="checkbox"/> recreation areas   |
| <input type="checkbox"/> parking layout   | <input type="checkbox"/> man-made improvements  |
| <input type="checkbox"/> total number of parking spaces                                   | <input type="checkbox"/> location & grades & size of proposed ___ drain ___ sewer ___ water   |
| <input type="checkbox"/> dimensions of parking spaces                                     |   |
| <input type="checkbox"/> dimensions of all building setbacks and yards                    |   |
| <input type="checkbox"/> size and height of proposed and existing buildings or structures |   |

- type material for drainage water & sewer
- method of sewer disposal
- method of waste disposal and incineration
- percolation test and soil log, if applicable
- location, height, direction of illumination, power and type of proposed outdoor lighting with photometric diagram on plan
- architectural or historic significance of any existing building to remain or to be removed
- earthwork balance (surplus/shortage)
- soil type(s)
- scale model of proposed development
- traffic study, including but not necessarily limited to:
  - anticipated traffic volumes
  - capacity of existing and proposed roadways
  - traffic volume impact from other developments
  - roadway network problems e.g. unsafe intersections, turns, grades
  - need for traffic signals and other improvements
- photographs of any unusual topographic, environmental, historic or physical aspect
- location of all structures with all setbacks, heights, yards, and floor area ratios, and finished floor evaluations
- sketches, plans and photographs of other known similar developments
- common open space including acreage calculations and proposed recreation facilities
- section or staging plan
- conformance to preliminary plan
- detailed soil erosion and sediment control plan
- detailed architectural and engineering data
- architect's ground floor or other floor plans
- illustrative building of any signs visible to the public
- all taxes paid
- environmental impact assessment per §20-10 of the Township Code
- 200 foot property search list – obtain from Tax Assessor's Office

Key:

- (X) Information is provided on site plan
- (W) Waiver is requested for this item.  
Please attach a list identifying, briefly explaining and justifying each requested waiver.



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## AFFIDAVIT OF OWNERSHIP

\_\_\_\_\_, attest that I/we reside at \_\_\_\_\_  
(Property Owner/s)  
in the \_\_\_\_\_ of \_\_\_\_\_ in the County of \_\_\_\_\_, and State  
of \_\_\_\_\_ that \_\_\_\_\_ is/are the owners in fee of all that certain lot,  
(Property Owner/s)  
piece or parcel of land situated, lying and being in the Township of Plainsboro, New Jersey, and  
known and designated as Block \_\_\_\_\_, Lot \_\_\_\_\_.

\_\_\_\_\_  
(Signature of Property Owner/s)

Notary Seal

Sworn and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
(Signature of Notary)

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## AUTHORIZATION

(If anyone other than above owner is making this application, the following authorization must be executed).

\_\_\_\_\_ is hereby authorized to  
make the within application.

Dated: \_\_\_\_\_ . 20\_\_\_\_ . \_\_\_\_\_  
(Owners/s to sign here)





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## TAXES COLLECTED

FILE NUMBER: \_\_\_\_\_

RE: Taxes Collected

ON: Block \_\_\_\_\_ Lot \_\_\_\_\_

This is to certify that all taxes levied have been collected on the above property for the period ended \_\_\_\_\_.

Signed \_\_\_\_\_ Date \_\_\_\_\_  
Municipal Tax Collector

Roll Back taxes have/have not been paid. Date \_\_\_\_\_

## Request for Taxpayer Identification Number and Certification

Give form to the requester. Do NOT send to the IRS.

Please print or type	Name (If joint names, list first and circle the name of the person or entity whose number you enter in Part I below. See instructions on page 2 if your name has changed.)	
	Business name (Sole proprietors see instructions on page 2.)	
	Please check appropriate box: <input type="checkbox"/> Individual/Sole proprietor <input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Other	
	Address (number, street, and apt. or suite no.)	Requester's name and address (optional)
	City, state, and ZIP code	

**Part I Taxpayer Identification Number (TIN)**

Enter your TIN in the appropriate box. For individuals, this is your social security number (SSN). For sole proprietors, see the instructions on page 2. For other entities, it is your employer identification number (EIN). If you do not have a number, see **How To Get a TIN** below.

*Note: If the account is in more than one name, see the chart on page 2 for guidelines on whose number to enter.*

Social security number
+
OR
Employer identification number
+

List account number(s) here (optional)

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**Part II For Payees Exempt From Backup Withholding (See Part II instructions on page 2)**

**Part III Certification**

Under penalties of perjury, I certify that:

- 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
- 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 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.

**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 of underreporting interest or dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, the 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. (Also see Part III instructions on page 2.)

Sign Here	Signature ▶	Date ▶
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*Section references are to the Internal Revenue Code.*

**Purpose of Form.**—A person who is required to file an information return with the IRS must get your correct TIN to report income paid to you, real estate transactions, mortgage interest you paid, the acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA. Use Form W-9 to give your correct TIN to the requester (the person requesting your TIN) and, when applicable, (1) to certify the TIN you are giving is correct (or you are waiting for a number to be issued), (2) to certify you are not subject to backup withholding, or (3) to claim exemption from backup withholding if you are an exempt payee. Giving your correct TIN and making the appropriate certifications will prevent certain payments from being subject to backup withholding.

**Note:** If a requester gives you a form other than a W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

**What Is Backup Withholding?**—Persons making certain payments to you must withhold and pay to the IRS 31% of such

payments under certain conditions. This is called "backup withholding." Payments that could be subject to backup withholding include interest, dividends, broker and barter exchange transactions, rents, royalties, nonemployee pay, and certain payments from fishing boat operators. Real estate transactions are not subject to backup withholding.

If you give the requester your correct TIN, make the proper certifications, and report all your taxable interest and dividends on your tax return, your payments will not be subject to backup withholding. Payments you receive will be subject to backup withholding if:

- You do not furnish your TIN to the requester, or
- The IRS tells the requester that you furnished an incorrect TIN, or
- The IRS tells you that you are subject to backup withholding because you did not report all your interest and dividends on your tax return (for reportable interest and dividends only), or
- You do not certify to the requester that you are not subject to backup withholding under 3 above (for reportable

interest and dividend accounts opened after 1983 only), or

- You do not certify your TIN. See the Part III instructions for exceptions.

Certain payees and payments are exempt from backup withholding and information reporting. See the Part II instructions and the separate Instructions for the Requester of Form W-9.

**How To Get a TIN.**—If you do not have a TIN, apply for one immediately. To apply, get Form SS-5, Application for a Social Security Number Card (for individuals), from your local office of the Social Security Administration, or Form SS-4, Application for Employer Identification Number (for businesses and all other entities), from your local IRS office.

If you do not have a TIN, write "Applied For" in the space for the TIN in Part I, sign and date the form, and give it to the requester. Generally, you will then have 60 days to get a TIN and give it to the requester. If the requester does not receive your TIN within 60 days, backup withholding, if applicable, will begin and continue until you furnish your TIN.