



BOROUGH OF FRANKLIN LAKES

ENGINEERING DEPARTMENT
PLANNING BOARD AND ZONING BOARD OF ADJUSTMENT
480 DE KORTE DRIVE
FRANKLIN LAKES, NEW JERSEY 07417
PHONE: 201-891-0048 EXT. 1220 FAX: 201-847-1361

SOIL MOVING PERMIT APPLICATION

Owner: _____ Phone No.: _____

Mailing Address: _____

Email: _____ Fax No.: _____

Job Address: _____

Block: _____ Lot: _____

Engineer: _____ Phone No.: _____

Email: _____ Fax No.: _____

Contractor: _____ Phone No.: _____

Email: _____ Fax No.: _____

<u>FEES AND ESCROW REQUIREMENTS</u>		
	<u>Fees (non-refundable)</u>	<u>Escrow (refundable)</u>
New Residence:	\$400.00	\$3,000.00
Addition, Accessory Structure, Pool, Tennis Court, Patio, Regrading, Wall, Etc.	\$300.00	\$2,500.00
Tree Specialist	\$200.00	
	\$ _____	\$ _____

NOTE: There must be attached to this application, maps and statements showing:

1. Present contour lines and grades of this property.
2. Proposed contour lines and grades resulting from intended removal/movement of soil.
3. Grades of any abutting streets, lots, and lands.
4. Other requirements for map preparation as outlined in ordinances.
5. Maps must be signed and sealed by a professional engineer, architect, or planner.

All submissions must be made at least 14 days prior to Planning Board meeting.

AS OWNER OF THIS PROPERTY, I ASSUME RESPONSIBILITY FOR ALL WORK BEING DONE ON SAID PROPERTY AND THE SUBMISSION OF THIS SOIL MOVING APPLICATION.

DATE: _____

SIGNATURE OF PROPERTY OWNER

BORO JOB NO: _____

AUTHORIZATION ATTACHMENT

You are hereby authorized to forward all correspondence including engineering reviews, reports, notices, vouchers and copies of Planning Board Attorney and/or Engineering vouchers to the following address: If no attorney is declared, all correspondence will be sent to the address of the owner.
