



SOIL REMOVAL PERMIT SUPPLEMENTAL FORM

Borough of Shrewsbury

419 Sycamore Avenue

Shrewsbury, NJ 07702

PLANNING AND ZONING DEPARTMENT

DATE RECEIVED: _____

ZONING PERMIT #: _____

CONTACT INFORMATION

(Applicant Name)	(Property Street Address)
(Applicant Address)	(Property Block & Lot)
(Applicant Address)	(Applicant Tel. #)

Responsible Party During Construction:

Each applicant for a Soil Removal Permit shall name a responsible party during construction, who shall be the point of contact for Borough Officials. Any notifications to be made by the Borough during construction shall be made to the party specified.

(Name)	(Address for Notifications To Be Mailed)
(Emergency Contact Email)	(Address for Notifications To Be Mailed)
(Emergency Contact Telephone)	(Emergency Contact Email)

PROJECT INFORMATION

Application is hereby made for authorization to undertake the import or export of greater than ten (10) cubic yards of soil to or from premises within the Borough of Shrewsbury. The applicant hereby acknowledges that soil removal operations shall be carried out in strict conformance with the requirements specified therein, including conduct of operations, payment of fees, and penalties for non-compliance.

Quantity & Type of Soil To Be Moved:

_____ Cubic Yards of Topsoil

_____ Cubic Yards of Sub-Soils

_____ Total Cubic Yards to be Moved

Location To or From Which Soil is to be Moved:

Route of Soil Movement Within Borough:

Commencement Date: _____

Completion Date: _____

Hours of Operation: _____

In submitting an application for a Soil Removal Permit the applicant agrees to conduct all operations in a manner consistent with §206 of the Borough Code, and that the information contained herein is complete and accurate. It is specifically agreed that any non-compliance shall be cured within 24 hours of written notice by the Borough, and that the Borough reserves the right to perform any corrective actions necessary to protect the general health and welfare of the public and deduct the costs for which from the Surety Bond required by §206-7. All work authorized by this permit must be completed within one (1) year of the effective date.

(Signature of Applicant) _____ Date _____

PERMIT AUTHORIZATION

Required Submittals	Required	Submitted	Incomplete	N/A
Completed Application Form	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Grading Plan - See Checklist	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Stormwater Management Report	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Soil Erosion & Sediment Control Plan	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Engineering Review Fees (§206-8) \$ _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Surety Bond (§206-7) \$ _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Any application materials listed above and identified as INCOMPLETE must be submitted prior to permit issuance.

Permit Issued		Permit Expiration:	
Authorized Borough Representative	Date	CC: Engineering, Construction, DPW, Zoning, Env. Comm., Code Enforcement, Police	_____