

TOWN OF CLINTON MINOR SUBDIVISION CHECK LIST:

Application # _____ Name of Applicant _____

 Date Filed: _____ Zone District _____
 Location (street) _____

 Tax Map Sheet _____ Block _____ Lots _____ # of Lots _____
 Map Reference Title _____ Date _____
 Date by which Board must act _____

PLAN DETAILS:

<u>Yes</u>	<u>No</u>	<u>N/A</u>	
()	()	()	File fee adequate
()	()	()	Application form complete
()	()	()	15 prints submitted
()	()	()	Drawn & sealed by NJ P.E. and L.S.
()	()	()	Scale: Not less than 1" = 100'
()	()	()	Scale and reference meridian
()	()	()	Entire tract and area to be subdivided
()	()	()	Location of existing structures, topographic features, & wooded areas in and within 200'
()	()	()	Name and address of owners
()	()	()	Name of adjoining owners
()	()	()	Tax map sheet, block and lot#'s
()	()	()	In and within 500' all existing and proposed streets, easements, drainage ditches & water courses
()	()	()	Original and proposed lot layout
()	()	()	Area of each lot (in square feet)
()	()	()	Lot dimensions
()	()	()	Setback, sideline and rear yard distances from existing structures
()	()	()	Zone boundaries on and adjoining properties
()	()	()	Certification that taxes are paid
()	()	()	Other details

Prepared by _____