

**WARWICK TOWNSHIP
HISTORICAL & ARCHITECTURAL REVIEW BOARD
APPLICATION FORM**

SECTION I:

TAX PARCEL NO. _____ DATE _____
OWNER: _____
OWNER ADDRESS: _____ PHONE _____
NAME OF AGENT: _____
ADDRESS OF AGENT: _____
LOCATIONS OF PROPERTY: _____
CLASS 1 _____; CLASS 2 _____; OR CLASS 3 _____; ZONING DISTRICT _____
SUBDIVISION OR LAND DEVELOPMENT NAME: _____ NO. OF LOTS _____ NO. OF ACRES _____

SECTION II:

FOR SUBDIVISION AND LAND DEVELOPMENTS:

PRELIMINARY PLAN _____ FINAL PLAN _____ OTHER _____
FOR BUILDING PERMIT: _____ FOR OTHER ACTION _____
DATES OF PLANS, DOCUMENTS AND OTHER SUBMISSIONS: _____

SECTION III:

TYPE OF PROPOSED WORK: _____
RESIDENTIAL _____ COMMERCIAL _____ OTHER _____
NEW CONSTRUCTION _____ ALTERATION _____ DEMOLITION _____
REHABILITATION/RESTORATION _____ OTHER _____
DESCRIPTION OF PROPOSED WORK: _____

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SECTION IV:

EIGHT (8) COPIES OF THE FOLLOWING MUST ACCOMPANY THIS APPLICATION AS INDICATED AND MUST BE SUBMITTED 30 DAYS PRIOR TO THE HARB REVIEW MEETING;

- _____ ARCHITECTURAL PLANS (SCALE $\frac{1}{4}$ = 1'0" PREFERRED)
 - _____ ELEVATIONS
 - _____ SITE PLANS (SCALE NO SMALLER THAN 1" = 100')
 - _____ LOCATION MAP (SCALE NO SMALLER THAN 1" = 2000'-0")
 - _____ ELEVATIONS OF ANY BUILDINGS & OTHER HISTORIC RESOURCES WITHIN 100 FEET TO 250 FEET OF ANY PROPOSED WORK, AS APPLICABLE
 - _____ BLACK AND WHITE OR COLOR PHOTOGRAPHS OR PROPOSED (5"X 7" PREFERRED)
 - _____ HISTORIC RESOURCE IMPACT STATEMENT
 - _____ A LIST OF PROPOSED ARCHITECTURAL MATERIALS
-

I CERTIFY THAT I AM THE OWNER OF THE PROPERTY:

SIGNATURE OF OWNER _____ DATE _____

SIGNATURE OF APPLICANT _____ DATE _____