

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

SECTION I:

TAX PARCEL NO. _____ DATE _____

OWNER: _____

OWNER ADDRESS: _____

OWNER PHONE _____ OWNER EMAIL _____

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 _____