



MOUNT LAUREL TOWNSHIP  
COMMUNITY DEVELOPMENT  
Zoning Board of Adjustment  
750 Centerton Road  
Mount Laurel, NJ 08054  
PHONE 856-234-0001 x 1226  
sbaskay@mountlaurel.com

To: Applicant  
From: Suzanna Baskay, Zoning Board Secretary  
Re: Zoning Board Application Process

Complete Rules and Regulations of the Zoning Board can be found at [www.mountlaurel.com](http://www.mountlaurel.com)

Per MLUL 18-2(b) and Rule 1:21-1(c) of the New Jersey Courts, representation by a New Jersey Licensed attorney is required except in the case of an individual representing themselves or a sole proprietorship.

The attached application packet is being provided to assist you in meeting the requirements for submission of a complete application to the Zoning Board of Adjustment, please note this application is exclusive of the Mt. Laurel MUA application and requirements. Please complete the enclosed Land Development Application and provide appropriate attachments as required. All submissions must be made through the Zoning Board of Adjustment Secretary. This includes re-submissions with revised plans. DO NOT SEND DIRECTLY TO THE PROFESSIONALS, PLANS SENT TO THE PROFESSIONALS DIRECTLY WILL NOT BE REVIEWED. All submissions must be logged in and transmitted to the professional staff by the Board Secretary.

Applications for consideration must be deemed complete by the Administrative Office (Zoning Board Secretary) prior to being scheduled for a Zoning Board meeting. Zoning Board of Adjustment meetings are held on the first Wednesday of the month, with the exception of July, at 6:00 pm in the courtroom of the Municipal Center. A meeting schedule is enclosed.

Per the Municipal Land Use Law and Local Ordinance, the Administrative Office (Zoning Board Secretary) has 45 days to deem an application complete or incomplete. You may request submission waivers in your application IN WRITING, but each must be approved by the professional staff at a meeting held once per month prior to scheduling your public hearing. At the time of application, proper filing and any other escrow fees must be posed, taxes must be current on the property and any other escrow accounts with the Township of Mount Laurel **encumbered on the subject block and lot must be current regardless of ownership or applicant as per Mt. Laurel Ordinance 34-28.2 and 154-100.1.**

You will be advised, in writing, if the application is deficient and what is required to be deemed complete. Once your application is deemed complete you will be notified via email of your tentative public hearing date. The Zoning Board Secretary generates the schedule and agenda for Board meetings and is your contact regarding placement on the agenda.

When you have a tentative public hearing date you will need to provide public notice of your application via your 200' list provided by the Mt. Laurel Tax Assessor and one of the approved News Papers, list enclosed. Failure to do so will result in the postponement of your public hearing.

Approval, Denial and/or conditions granted by the board will be defined in a Resolution prepared by the Board Attorney and memorialized at the following Zoning Board meeting. Twelve (12) copies of final compliance plans, incorporating all approvals and conditions, must be delivered to the Board Secretary for distribution and signatures. You must comply with all the terms of the Resolution, including but not limited to the payment of taxes, escrow fee's and MUA approval before your plans are signed by the Board Professionals.

**PLEASE NOTE: COLLECTION OF ADDITIONAL ESCROW IS REQUIRED WITH THE FOLLOWING:**

(Per Ordinance 154-103 and 2019-30)

1. Revised Plans and Pre-Compliance Plans - \$1,000.00
2. Compliance or Final Plans for Final Signature – Replenish escrow as original escrow
3. Prior to Public Hearings - Replenish escrow to the original amount
4. Board Meeting to memorialize Resolution – Replenish to the original amount.
5. Deficiency in the escrow account – paid within 15 days of notice as per the escrow agreement



## Municipal Utilities Authority

1201 SOUTH CHURCH STREET. MOUNT LAUREL, NEW JERSEY 08054

(856) 234-0062 Customer Service • (856) 722-5900

FAX (856) 866-1092 [www.MLTMUA.com](http://www.MLTMUA.com)

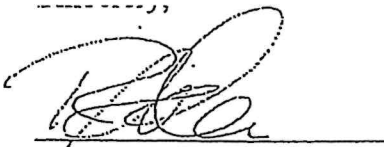
Dear,

In an effort to streamline the review process for all involved, I would like to suggest that the Zoning Board Professionals encourage all applicants for Site Plan or Major Subdivision approval to take advantage of the MUA Conceptual Review process. Conceptual Review attempts to identify potential MUA requirements, conditions, restrictions or limitations so the developer's engineer can incorporate them into the site design at an early stage in the Township review process. This helps avoid unnecessary reengineering and the associated time delays that sometimes occur if the developer's engineer has not fully considered Authority standards for construction prior to submitting for final MUA approval.

Projects may be submitted for conceptual Authority approval prior to, or at the same time, as submittal to the Township. Generally, much less review time is required for final Authority approval if a project has first been conceptually approved.

Feel free to contact me if you have any questions or require further clarification.

Sincerely,



Robert A. Adler  
Operations Engineer

cc: Pamela J. Carolan, Executive Director



MOUNT LAUREL TOWNSHIP PLANNING AND ZONING BOARDS  
FEE SCHEDULE.  
ORDINANCE CHAPTERS 124, 138, 148 AND 154

APPLICATION TYPE	APPLICATION FEE	ESCROW FEE
SITE PLANS (124-11)		
Informal Concept	\$100	\$500
Formal Concept to the Planning Board	\$500	\$2,000
Minor Site Plan	\$250	\$4,000
Minor Site Plan Alteration (committee application)	\$250	\$1,000
Preliminary Major and Amended	\$275	<b>Residential</b> \$2,000 plus \$50 unit <b>Non-residential</b> \$4,000 plus \$25 per 100 sf of floor area to a maximum of \$15,000
Final Major and Amended	\$275	<b>Residential</b> \$2,000 plus \$50 unit <b>Non-residential</b> \$3,000 plus \$25 per 100 sf of floor area to a maximum of \$10,000
Preliminary & Final Combined and Amended	\$375	<b>Residential</b> \$3,000 plus \$50 per unit <b>Non-residential</b> \$5,000 plus \$200 per 100 sf of floor area to a maximum of \$25,000
Site Plan Waiver	\$100	\$200
Conditional Use	\$200	\$500 plus applicable variance subdivision and/or site plan fees
Extension of Approval	\$150	\$250



Special Meeting	\$100	\$250
Temporary Use or Structure	\$100	\$500
SPEED HUMPS (148-17.2) Minor Site Plan	\$250	\$1,000
SUBDIVISIONS (138-46)		
Concept	\$100	\$2,000
Sketch Plat/Minor SD/Lot Line Change	\$275	\$1,500
Major Preliminary or Amended Preliminary	\$275	<b>Residential</b> \$3,000 plus 100 per lot <b>Non-residential</b> \$5,000 plus 100 per lot
Major Final or Amended Final	\$275	<b>Residential</b> \$3,000 plus 100 per lot <b>Nonresidential</b> \$5,000 plus 100 per lot
ZONING BOARD (154-103)		
A (Appeals from ZO decision)	\$250	\$500
B (Interpretation of ordinance)	\$250	\$750
C (Bulk variance)	\$250	<b>Residential bulk only</b> \$1,000 per meeting per lot <b>Sign</b> \$1,000 <b>All with Site Plan or Subdivision</b> \$500 per variance plus applicable SP and/or SD fees <b>Non-residential without SP or SD</b> \$1,000 per variance

D (Use variance)	\$250	<b>Residential</b> \$2,000 <b>Non-residential</b> \$5,000 plus applicable SP or SD fees
Conditional Use	\$200	\$500 plus Variance, SP or SD escrow fees
<b>ALL APPLICATIONS</b>		
Publication of Decision	\$40.00	
200 foot Property owners list	\$10.00 per lot	
Plan Revisions and Pre-Compliance		\$1,000
Final Compliance Plans		Same as the initial escrow requirement
Prior to Board Hearings		Same as the initial escrow requirement
Request for Special Meeting	\$100	\$250
Extension of Approval	\$150	\$250

Please submit 4 separate checks made out to Mount Laurel Township

- 1.) Combined escrow
- 2.) Application
- 3.) Publication of Decision
- 4.) **200' property list**

- Escrow fees are cumulative for all applications.
- Escrow fees are an initial requirement and not an estimate
- Escrow monies are to be replenished with each revision of plans, upon receipt of compliance or final plans, the week of public hearings, or memorialization of a resolution, and upon request of the Board Secretary.



MOUNT LAUREL TOWNSHIP  
Zoning Board Secretary  
750 Centerton Road  
Mount Laurel, NJ 08054  
Email: [sbaskay@mountlaurel.com](mailto:sbaskay@mountlaurel.com)  
PHONE 856-234-0001 x 1226

## **MEMORANDUM**

Please be aware that as per the Mount Laurel Township fee schedule included in your application, Ordinance 2023-10, Escrow monies are to be replenished with each revision of plans, upon receipt of pre-compliance and/or final compliance, the week of any public hearing, and upon request of the board secretary

Mount Laurel Township Ordinance 154-103(7) Submission of revised plans requires the applicant to submit an escrow fee in the amount of \$1,000.00.

Mount Laurel Township Ordinance 154-103(8) Submission of compliance plans requires the applicant to submit an escrow fee equal to the initial escrow requirement. This escrow is based on plans that satisfy all conditions of approval.

Plans will not be accepted if the required escrow monies are not included with the submission or if the escrow account is not in good standing.

Plans mailed to the Zoning or Planning Boards without the required fee or with a deficient escrow account will be held for no more than ten (10) days to allow for an escrow deposit. If the deposit is not received within ten (10) days the plans will be rejected and will be sent back to, or require pick up by, the applicant.



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COMMUNITY DEVELOPMENT  
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750 Centerton Road  
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[SBaskay@mountlaurel.com](mailto:SBaskay@mountlaurel.com)  
[MLPlanning@mountlaurel.com](mailto:MLPlanning@mountlaurel.com)

### MEMORANDUM

To: Applicant

From: Suzanna Baskay, Zoning Board of Adjustment Administrator  
Trish Hochreiter, Planning Board Administrator

Re: New Application, Revised Plans and Compliance Plans

#### PLANS

As per the Mount Laurel Township code 34-6A, **all documents, plans, applications, and any material related to any Zoning Board of Adjustment application must be delivered to, and transmitted by, the Zoning Board of Adjustment Secretary.** Any materials delivered to the Zoning Board of Adjustment Professionals will be returned to you and will not be reviewed.

Revised plans and/or responses to the township professional's reports should be submitted for review at least 10 days before your scheduled public hearing. Delay in the filing of revised plans or response reports may cause your application to be continued to an upcoming meeting date.

#### ESCROW ACCOUNT

Your escrow account will be monitored, and with each submission, you will be required to replenish the account. The escrow account must be in good standing before a hearing may take place. Always check your monthly statements from the Finance Department. Statements are sent to the applicant on file. If you are not receiving your statements monthly, please check with the Zoning Board of Adjustment Secretary to ensure your proper contact and mailing address. You have signed an escrow agreement with Mt. Laurel Township to pay this financial obligation in a timely manner (15 days). Should you fail to pay the amount required when due, the Township shall be entitled to pursue all remedies at law or equity. Interest shall accrue at the rate of 18% per annum simple interest on all sums unpaid after the due date. The Township may collect a reasonable attorney's fee which shall not be less than \$300.00 should litigation for the purpose of collecting any sum be commenced.

If you have any further questions regarding this policy and or procedure, please don't hesitate to contact me.



Zoning Ord. Section 154-103 for Fee Schedule — Ordinance 2010-3, 4, 5 & 6. Publication of Decision fee required Land Use Ord. 34-26. Applicant must be present at the Public Hearing.

## **Part One**

## **Part Two**

<u>Submit to the Board Secretary</u>	<u>Submit to Board Secretary <b>after</b> part one is deemed complete</u>
<input type="checkbox"/> Fee's <input type="checkbox"/> Application- 3 pages - signed – 7 copies <input type="checkbox"/> Supporting plans/surveys – see below <input type="checkbox"/> Letter of Intent – see below <input type="checkbox"/> 200' list request <input type="checkbox"/> Memorandum of Procedure – signed <input type="checkbox"/> Tax Certification signed by Tax Collector <input type="checkbox"/> Escrow Agreement – signed <input type="checkbox"/> W-9 Rev. March 2024, if applicable <input type="checkbox"/> Home Owners Association approval	<input type="checkbox"/> List of Property Owners within 200' (Tax Assessors List) <input type="checkbox"/> Proof of Service (certified mail receipts and/or signatures) <input type="checkbox"/> Affidavit of Service – signed <input type="checkbox"/> One (1) copy of Letter to Property Owners <input type="checkbox"/> Affidavit of Publication from Official Newspaper <input type="checkbox"/> Affidavit of Corp. <i>with Subdivision or Site Plan</i>

"A" Appeal	Twelve Copies of survey, plot plan
"B" Interpretation	Twelve Copies of survey, plot plan
"C" Bulk Variance	Twelve Copies of a survey, plot plan*
"D" Use Variance	Twelve Copies of a survey, plot plan*
See Site Plan/Subdivision Dev. Checklist Packet	Twelve Copies of survey, plot plan *

### **\* Commercial Applications**

**Plans** - Submit seven (7) standard copies 30"x42" or 24"x36" and submit five (5) 11"x17" size copies.

**Application**- 3 page application original & 6 copies, Escrow Agreement- original & 7 copies

**Letter of Intent**- a letter of intent is required for all applications. This is a separate document that explains in detail what you are proposing or requesting as well as any relevant history on the property

Should you require additional assistance please contact a Land Use Attorney. You may represent yourself as an individual. If you are a corporation you must be represented by a licensed New Jersey Attorney.

If you have any questions contact:

Ms. Suzanna Baskay, Board Administrator

Telephone: (856) 234-0001 ext. 1226

Email: sbaskay@mountlaurel.com



# Zoning Board of Adjustment 2024

CHAIRMAN	CHRISTOPHER GRAY	
VICE CHAIRPERSON	JEANNE ANDERSEN	
	NICK DANNENFELSER	
	JOHN FRANCESONE	
	CHARLES HOLMES	
	ALAN KRAMER	
	BRIAN SHARP	
ALTERNATE #1	ANILKUMAR DESAI	
ALTERNATE #2	ATUL BHANKHARIA	
ENGINEER	ALAIMO GROUP	732-410-2651
	BILL LONG	EXT. 1020
PLANNER	REMINGTON & VERNICK ENGINEERS	856-216-1890
	ASHTON JONES	EXT. 1092
ENGINEER	PENNONI	856-216-1890
TRAFFIC ENGINEER	BETH-ANN GRASSO	
FIRE MARSHAL	BRIAN McVEY	856-234-6053
		EXT. 5926
SOLICITOR	CAMPBELL ROCCO LAW	856-470-1076
	ED CAMPBELL	
BOARD SECRETARY	SUZANNA BASKAY	856-234-0001
	Email: <a href="mailto:sbaskay@mountlaurel.com">sbaskay@mountlaurel.com</a>	EXT. 1226
ASST. BOARD SECRETARY	JENNIFER PARKS	856-264-0001
	Email: <a href="mailto:jparks@mountlaurel.com">jparks@mountlaurel.com</a>	EXT. 1227



# Mount Laurel Township

Department of Community Development

750 Centerton Road, Mount Laurel New Jersey 08054

Phone: 856-234-0001 P-ext. 1318 Z-ext. 1226 [www.mountlaurel.com](http://www.mountlaurel.com)

## APPLICATION FOR LAND DEVELOPMENT

Application No. \_\_\_\_\_

SITE ADDRESS: \_\_\_\_\_

App. Rec'd \_\_\_\_\_

Admin. Complete \_\_\_\_\_

Complete for PH \_\_\_\_\_

BLOCK: \_\_\_\_\_ LOT(S): \_\_\_\_\_ ZONE(S) \_\_\_\_\_

### **PLEASE CHECK ALL THAT ARE REQUESTED:**

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> Minor Site Plan                      | <input type="checkbox"/> Preliminary Major Site Plan   | <input type="checkbox"/> Final Major Site Plan   |
| <input type="checkbox"/> Minor Subdivision                    | <input type="checkbox"/> Preliminary Major Subdivision | <input type="checkbox"/> Final Major Subdivision |
| <input type="checkbox"/> Concept Plan (optional)              | <input type="checkbox"/> Conditional Use               | <input type="checkbox"/> Other: _____            |
| <input type="checkbox"/> Minor Site Plan Alteration           | <input type="checkbox"/> Amended Site Plan             | <input type="checkbox"/> Extension of Time       |
| <input type="checkbox"/> Site Design Waiver (Exception) _____ |  |  |

### **Variance Request (NJSA 40:55D-70)**

- ☐ (a) Appeal of Admin. Officer Action
- ☐ (b) Interpretation
- ☐ (c) Bulk Variance
- ☐ (d) Use Variance

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1. Applicant's Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Alt: Phone \_\_\_\_\_ Email: \_\_\_\_\_

Status of Applicant:    Individual          Partnership          Corporation

Names and Addresses of all stockholders or individual partners owning at least 10% of stock or interest per N.J.S.A 40:55D-48.1 through 48.4 (Attach a separate sheet if necessary.)

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2. Owner's Name \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Alt. Phone: \_\_\_\_\_ Email: \_\_\_\_\_

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3. If the Applicant is required to be represented by an attorney, list the attorney's name & address here:

N.J. Attorney's Name \_\_\_\_\_

N.J. Attorney's Address \_\_\_\_\_

Phone: \_\_\_\_\_ Alt. Phone \_\_\_\_\_ Email: \_\_\_\_\_

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4. (a) Check here ☐ if zoning variances are required.

(b) Check here ☐ if exceptions to the application or municipal requirements are requested (N.J.S.A 0:55D-51)

(c) Check here ☐ if exceptions to the Residential Site Improvement Standards (RSIS, NJAC 5:21-3.1)

(d) Check here ☐ if waivers from the RSIS (N.J.A.C 5:21-3.2) are requested. (Such waivers require application to, and approval of, the N.J. Site Improvement Advisory Board.)

**NOTE: If any of the above four (4a, b, c, d) are required, attached hereto separate exhibit(s) for each category of relief sought, stating the factual basis, legal theory, and whether they have been previously granted.**

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5. Name(s) and address (es) of person(s) preparing plans and reports (*Attach additional sheets if necessary*):

Name: \_\_\_\_\_ Profession: \_\_\_\_\_ NJ Licenses: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Name: \_\_\_\_\_ Profession: \_\_\_\_\_ NJ Licenses: \_\_\_\_\_

Address \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_

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6. (a) Are there any existing Deed Restrictions? (Check box that applies) ☐ NO ☐ YES (Attach copy of existing restrictions)

(b) Are any Deed Restrictions proposed? (Check box that applies) ☐ NO ☐ YES (Attach copy of proposed restrictions)

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7. Contemplated form of ownership (Check all that apply):

☐ Fee Simple

☐ Condominium

☐ Cooperative

☐ Rental

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8. Briefly describe and include dates for any prior or currently pending proceedings by the applicant, or other if known, before this Planning Board or Zoning Board or any other federal, state, or local board or agency involving the property that is the subject of this application. (*Attached sheet if necessary*)

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9. (A) List the exact section of the Township Code where variance (s) or waiver (s) is requested (*Attach sheet if necessary*)

The Variance sought is from Section(s) 154-\_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, of the Zoning Ordinance to Enable the Applicant to:

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(B) Hardship or Special Reason why the Variance Should Be Granted (see attached sheet) \_\_\_\_\_

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10. List any material accompanying this application. (*Attach sheet if necessary*)

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11. Applicant certifies that the plans and the attached (Checklist if applicable) are accurate to the best of his/her knowledge.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Applicant's Name (please print)

## Consent of Owner

The undersigned, being the owner of the lot or tract described in this application, hereby consent to the making of this application and the approval of the plans submitted herewith with condition(s), if appropriate. I further consent to the inspection of this property in connection with this application as deemed necessary by the municipal agency (If owned by a corporation, attach a copy of resolution authorizing application and officer signature.) I understand that all the Escrow Accounts and Taxes must be paid current.

Per Article XIII Administration section 154-100.1 of the Township Code to be deemed a complete application. I understand that NO application for development shall be deemed complete if there are outstanding, uncollected fees and escrows resulting from last application or prior submissions involving the property in question or any part thereof, including the base tract, and no application shall be deemed complete if there are outstanding taxes-

If the escrow account is deficient due to the application process of a previous or current application, the property owner is responsible to pay the negative balance.

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Company Name or Individual

\_\_\_\_\_  
Position/Title

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Sworn and Subscribed to me before this

\_\_\_\_ Day of \_\_\_\_\_, \_\_\_\_\_ (year)

\_\_\_\_\_

\_\_\_\_\_  
FEES: See Ordinance 2010-3, 2010-4, 2010-5, 2010-6, & 2023-10

Please provide separate checks made payable to Mount Laurel Township for the following amounts:

Filing Fee \_\_\_\_\_

Escrow \_\_\_\_\_

200' list Request \_\_\_\_\_

Publ. Of Decision \_\_\_\_\_

Received this \_\_\_\_ Day of \_\_\_\_\_, \_\_\_\_

\_\_\_\_\_  
Signature of Board Administrator

**MOUNT LAUREL TOWNSHIP ZONING BOARD OF ADJUSTMENT**

**AFFIDAVIT OF CORPORATION**

AS REQUIRED BY NEW JERSEY LAW  
(P.L. 1977, CHAPTER 336)

STATE OF: NEW JERSEY

SS:

COUNTY OF: BURLINGTON

\_\_\_\_\_, of full age, being duly sworn according to  
Law, upon his oath deposes and says: .

1. I am \_\_\_\_\_ (Title, i.e. , Secretary, President, Partner) in the  
Firm of \_\_\_\_\_ (name) a corporation/partnership with principle  
offices at \_\_\_\_\_. The State of incorporation is  
\_\_\_\_\_ (if a corporation)

2. I am duly authorized by \_\_\_\_\_ to make this statement under  
oath in order to comply with the laws of the State of New Jersey as required by P.L.  
1977, Chapter 336 with respects to an application for development filed or to be filed  
with the Mount Laurel Township Zoning Board of Adjustment to subdivide a parcel of  
land into six or more lots; and/or applying for a variance to construct a multiple  
dwelling of 25 or more family units; and/or c for approval of a site to be used for  
commercial purposes. The applicant in this matter is

\_\_\_\_\_  
3. I further state to my own personal knowledge that the following list of  
persons own 10% or more of the stock of any class of stock of the corporation or 10%  
Or more of the interest in the partnerships:

COMPLETE FORM ON PAGE 2



**NAME**

**ADDRESS**

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**NOTE TO APPLICANT:** Where corporations/partnerships own 10% or more of the stock/interest in the undersigned or in another corporation/partnership so reported, this requirement shall be followed until the names and addresses of the noncorporate stockholders/individual partners exceeding the 10% ownership criterion have been listed.

\_\_\_\_\_  
Signature of Deponent

Sworn to and Subscribed before me this

\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

\_\_\_\_\_  
Notary

Notary Seal

## **MEMORANDUM OF PROCEDURE**

TO: All Applicants to the Zoning Board of Adjustment  
FROM: Mount Laurel Township Zoning Board of Adjustment  
Re: Zoning Board Procedures — Issuance of Building Permits

This Memorandum has been prepared to advise all applicants of the procedure used by the Mount Laurel Township Zoning Board of Adjustment and to further advise successful applicants when they can expect a zoning and building permit.

After a complete application is filed and all fees are paid, this matter will be submitted to the Zoning Board of Adjustment for a public hearing. The applicant must appear before the board and present the application. At the conclusion of the hearing a vote will be taken and the relief sought will either be granted or denied. At the next regular meeting of the Zoning Board of Adjustment (first Wednesday of every month) the Zoning Board of Adjustment will adopt a formal written resolution with specific findings of fact and conclusions of law together with an itemization of all conditions and exceptions to the relief granted.

The decision of the Zoning Board is not final until the resolution as aforesaid is adopted and signed or a memorandum is issued. A successful applicant will not be able to get a zoning or building permits until the resolution is signed or a memorandum is issued by the Zoning Board of Adjustment.

All applicants are cautioned, however, that even if a building permit is issued, the matter might not yet be final. This is true because another interested party (such as an adjacent property owner) could file an appeal from the decision of the Zoning Board of Adjustment. The right to file such an appeal generally exists for the 45 day period following the publication of the adopted resolution. It is suggested that any applicant that is concerned about the possibility of the filing of an appeal should consult with their attorney.

**Receipt of this Memorandum is acknowledged.**

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**Applicant's Signature**

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**Date**



Application No. \_\_\_\_\_

Block: \_\_\_\_\_ Lot: \_\_\_\_\_

Address: \_\_\_\_\_

### ESCROW AGREEMENT TO PAY FEES

THIS AGREEMENT made and entered on this \_\_\_\_\_ day of \_\_\_\_\_, in the year of \_\_\_\_\_.

Project Name: \_\_\_\_\_

Project Location: \_\_\_\_\_

Applicant Name: \_\_\_\_\_

Applicant's Address \_\_\_\_\_

Applicant's Federal ID No. or SSN: \_\_\_\_\_

Phone Number/Email Address: \_\_\_\_\_

Is hereinafter referred to as "Applicant", the Planning Board or Zoning Board of Adjustment of Mount Laurel Township is hereinafter referred to as "Board", and Mount Laurel Township in the County of Burlington is hereinafter referred to as "Township".

WHEREAS, Applicant is proceeding under the Land Subdivision and Development Ordinance (hereinafter "Ordinance", for approval of: a Variance, Subdivision or Site Plan; and

- **PURPOSE:** The Board authorizes its professional staff to review, inspect, report, and study all plans, documents, statements, improvements, and provisions made by the Applicant in conforming to the requirements of the Code of the Township of Mount Laurel, New Jersey. The Board directs its professional staff to make all oral and/or written reports to the Board of its conclusions and findings derived from the review, study, investigation and like or similar duties performed as elsewhere authorized. The Applicant, by execution off this agreement, agrees to pay all reasonable professional fees incurred by the Board for the performance of the duties outlined above.
- **ESCROW DEPOSIT:** The Township and Board hereby acknowledge initial receipt of \$ \_\_\_\_\_, said sum being a cash deposit to be placed in a township trust account to cover the cost of the aforementioned review, study and investigation fees. Such sum shall be charged periodically as fees and charges accrue and the balance of the escrow sum, if any, after all charges and fees have been paid shall be returned to the Applicant.
- **INCREASE IN ESCROW FUND:** The Applicant agrees to pay any additional sum required to pay charges and fees not covered by the escrow fund within fifteen (15) days after the date of receipt of a notice of deficiency by the appropriate township office. The Applicant understands and agrees to pay such sum notwithstanding any dispute to the reasonableness of fees and charges.

- **CONTEST OF REASONABLENESS:** The Applicant agrees that the reasonableness and/or accuracy of any fee or charge may be challenged within seven (7) days of receipt of the professional's billing voucher and in accordance with the Code of the Township of Mount Laurel, New Jersey. Where the Applicant objects to the payment of any voucher from the escrow fund, he/she shall have the right to appeal, in accordance with the requirements of the Municipal Land Use Law, *N.J.S.A. 40:55D-1 et seq.*
- **NOTICE:** The Applicant agrees that all notice or refunds shall be mailed to the following address:

**Contact Name:** \_\_\_\_\_

**Company Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip Code** \_\_\_\_\_

**Telephone#:** \_\_\_\_\_ **Fax #:** \_\_\_\_\_ **Email:** \_\_\_\_\_

- I agree to be responsible for all bills against this development's escrow account. In the event that this project is sold or my interest is transferred to another party, my obligation can only be relieved if all outstanding escrow bills are paid and the new principal obligates himself to the responsibility of all future bills in an agreement with the Township.
- **COLLECTION:** Should the Applicant fail to pay any amount required to be paid hereunder when due, the Township shall be entitled to pursue all remedies at law or equity. Interest shall accrue at the rate of 18% per annum interest on all-sums unpaid after the due date. The Township may collect a reasonable attorney's fee which shall not be less than \$300.00 should litigation for the purpose of collecting any sum be commenced.

\_\_\_\_\_  
 Authorized Agent Name/Title (please print) \_\_\_\_\_ Date \_\_\_\_\_

\_\_\_\_\_  
 Authorized Agent Signature\*

\*If the applicant is a company/corporation, this agreement must be attested to by an appropriate officer or authorized attorney of record representing the applicant.

\*If the applicant is an individual, this agreement can be attested to by the applicant or authorized attorney of record representing the applicant.

Cc: Finance Office, \_\_\_\_\_  
 Professional Staff, \_\_\_\_\_



**MOUNT LAUREL TOWNSHIP**  
**COMMUNITY DEVELOPMENT**  
**Planning Board and Zoning Board of Adjustment**  
**750 Centerton Road**  
**Mount Laurel, NJ 08054**  
**PHONE 856-234-0001 P-ext. 1316 Z-ext. 1226**

Block \_\_\_\_\_ Lot \_\_\_\_\_ Applicant \_\_\_\_\_

Final approvals will be subject to MUA approval.

Please check one of the following and return with your application packet.

- ☐ On \_\_\_\_\_ (date) I applied to the Mount Laurel Township MUA for plan review and to establish escrow.
- ☐ I have not applied to the Mount Laurel Township MUA for plan approval and escrow at this time, I understand, therefore, that the MUA will not be part of the review process for this application. The MUA can require changes which could cause the Mount Laurel professionals to re-review plans/application.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date



## REQUEST FOR 200' PROPERTY LIST

Please furnish a list of the property owners and their mailing addresses for all properties within 200 feet of:

**BLOCK** \_\_\_\_\_ **LOT** \_\_\_\_\_

SITE ADDRESS \_\_\_\_\_

**BLOCK** \_\_\_\_\_ **LOT** \_\_\_\_\_

SITE ADDRESS \_\_\_\_\_

**BLOCK** \_\_\_\_\_ **LOT** \_\_\_\_\_

SITE ADDRESS \_\_\_\_\_

REQUESTED BY: NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

REQUEST FOR: \_\_\_\_\_ Zoning Board Appl. \_\_\_\_\_ Planning Board Appl. \_\_\_\_\_ Other

LIST NEEDED BY (Date): \_\_\_\_\_

CHECK ONE PREFERRED METHOD OF DELIVERY \_\_\_\_\_ PICK UP \_\_\_\_\_ MAIL \_\_\_\_\_ EMAIL

### FEE SCHEDULE:

Request per property \$10.00

Tax Map Page .07

**\*\*Pursuant to the provisions of NJSA 40:55D-12c .... the fee is twenty-five cents (\$.25) per name or ten dollars (\$10.00), whichever is greater....**



## MOUNT LAUREL TOWNSHIP

Zoning Board of Adjustment

750 Centerton Road

Mount Laurel, NJ 08054

TO: ZONING BOARD OF ADJUSTMENT  
FROM: TAX COLLECTORS OFFICE  
TAX CERTIFICATION / PROPERTY STATUS  
DATE:

ONLY ONE BLOCK AND LOT PER REQUEST ON THIS FORM. THE NAME  
MUST BE AS IT APPEARS ON THE TAX BILL. VERIFICATION OF BLOCK, LOT,  
AND OWNER INFORMATION IS AVAILABLE IN THE TAX BOOK LOCATED  
OUTSIDE THE TAX ASSESSOR'S OFFICE.

In reference to Block \_\_\_\_\_ Lot \_\_\_\_\_ Qualifier \_\_\_\_\_

Located at: \_\_\_\_\_

Assessed to (property owner) \_\_\_\_\_

### **Tax Collectors Office:**

Date: \_\_\_\_\_

Certified by: \_\_\_\_\_

Paid Current: \_\_\_\_\_

Or Delinquent (Quarter (s)) \_\_\_\_\_

Liens: \_\_\_\_\_

**Request for Taxpayer  
Identification Number and Certification**

Go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9) for instructions and the latest information.

**Give form to the  
requester. Do not  
send to the IRS.**

**Before you begin.** For guidance related to the purpose of Form W-9, see *Purpose of Form*, below.

Print or type. See Specific Instructions on page 3.	<b>1</b> Name of entity/individual. An entry is required. (For a sole proprietor or disregarded entity, enter the owner's name on line 1, and enter the business/disregarded entity's name on line 2.)	
	<b>2</b> Business name/disregarded entity name, if different from above.	
	<b>3a</b> Check the appropriate box for federal tax classification of the entity/individual whose name is entered on line 1. Check only <b>one</b> of the following seven boxes.  <input type="checkbox"/> Individual/sole proprietor <input type="checkbox"/> C corporation <input type="checkbox"/> S corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate  <input type="checkbox"/> LLC. Enter the tax classification (C = C corporation, S = S corporation, P = Partnership) _____ <b>Note:</b> Check the "LLC" box above and, in the entry space, enter the appropriate code (C, S, or P) for the tax classification of the LLC, unless it is a disregarded entity. A disregarded entity should instead check the appropriate box for the tax classification of its owner.  <input type="checkbox"/> Other (see instructions) _____	<b>4</b> Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):  Exempt payee code (if any) _____  Exemption from Foreign Account Tax Compliance Act (FATCA) reporting code (if any) _____  (Applies to accounts maintained outside the United States.)
	<b>3b</b> If on line 3a you checked "Partnership" or "Trust/estate," or checked "LLC" and entered "P" as its tax classification, and you are providing this form to a partnership, trust, or estate in which you have an ownership interest, check this box if you have any foreign partners, owners, or beneficiaries. See instructions. <input type="checkbox"/>	
	<b>5</b> Address (number, street, and apt. or suite no.). See instructions.	Requester's name and address (optional)
<b>6</b> City, state, and ZIP code		
<b>7</b> List account number(s) here (optional)		

**Part I Taxpayer Identification Number (TIN)**

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

**Note:** If the account is in more than one name, see the instructions for line 1. See also *What Name and Number To Give the Requester* for guidelines on whose number to enter.

<b>Social security number</b>											
				-				-			
<b>or</b>											
<b>Employer identification number</b>											
					-						

**Part II Certification**

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
- I am not subject to backup withholding because (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
- I am a U.S. citizen or other U.S. person (defined below); and
- The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

**Certification instructions.** You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and, generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

<b>Sign Here</b>	Signature of U.S. person	Date
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**General Instructions**

Section references are to the Internal Revenue Code unless otherwise noted.

**Future developments.** For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9).

**What's New**

Line 3a has been modified to clarify how a disregarded entity completes this line. An LLC that is a disregarded entity should check the appropriate box for the tax classification of its owner. Otherwise, it should check the "LLC" box and enter its appropriate tax classification.

New line 3b has been added to this form. A flow-through entity is required to complete this line to indicate that it has direct or indirect foreign partners, owners, or beneficiaries when it provides the Form W-9 to another flow-through entity in which it has an ownership interest. This change is intended to provide a flow-through entity with information regarding the status of its indirect foreign partners, owners, or beneficiaries, so that it can satisfy any applicable reporting requirements. For example, a partnership that has any indirect foreign partners may be required to complete Schedules K-2 and K-3. See the Partnership Instructions for Schedules K-2 and K-3 (Form 1065).

**Purpose of Form**

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS is giving you this form because they

**NOTIFICATION REQUIREMENTS**  
**FOR**  
**ZONING AND/OR PLANNING BOARD APPLICANTS**

In addition to notifying residents within 200 feet of the subject property, there are some applications in which additional notification requirements apply. **All required notifications must be given by certified mail or personal service at least 10 days in advance of the meeting date, Not including the day of the meeting.** These requirements are set forth in N.J.S.A 40:55D.12, and include the following:

1. if any portion of the property is located within 200 feet of an adjoining municipality, notice must be given to the Township Clerk of such municipality. It will also be necessary to obtain, from the adjoining municipality's tax assessor, the names and addresses of the owners in that municipality that are within 200 feet of the subject property, and they must also be given notice.
2. If the property is: 1.) located on an existing or proposed County road which is shown on the official County map or on the County Master Plan; 2.) adjacent to or adjoins other County lands; or 3.) located within 200 feet of a municipal boundary, it is necessary to give notice to the **BURLINGTON COUNTY PLANNING BOARD** whose mailing address is P.O. Box 6000, Mount Holly, NJ 08060.
3. If the property is located on a State highway, notice must be given to the **COMMISSIONER OF TRANSPORTATION**, whose mailing address is 1035 Parkway Avenue, CN 600, Trenton, NJ 08625.
4. **In all cases** in which notice is required, a legal notice must be published in one of the official newspapers of Mount Laurel Township:
  1. **Burlington County Times**, One Oxford Valley, 2300 East Lincoln Highway, Suite 500D, Langhorne, PA 19047, [legals@couriertimes.com](mailto:legals@couriertimes.com), (215)-949-4112.
  2. **Central Record**, 307 Destine Ave., Landsdale, PA 19446, [sjlegals@sjlocalnews.com](mailto:sjlegals@sjlocalnews.com), (215)-648-1066.
  3. **Courier Post**, Cherry Hill Courier Post, 435 E. Walnut St., Green Bay, WI 54301, [cplegals@gannett.com](mailto:cplegals@gannett.com), (609)-663-7100.
5. If the application in question exceeds 150 acres, or involves 500 or more dwelling units, notice must be given to the Director of the Division of State and Regional Planning, DEPARTMENT OF COMMUNITY AFFAIRS, whose mailing address is 101 S. Broad St, Trenton, NJ 08608. Such notice shall include a copy of any maps or documents which are required to be on file with the municipality.

IF YOU HAVE ANY QUESTIONS CONCERNING THE ABOVE, YOU SHOULD CONSULT WITH YOUR ATTORNEY OR THE MOUNT LAUREL TOWNSHIP BOARD ADMINISTRATOR. **If any requirement is overlooked the Board to which you are applying will not be able to hear your application on the date scheduled.**



**MEETING DATES FOR 2024**  
**And 2025 Reorganization & 1<sup>st</sup> Regular Meeting**  
**Zoning and Planning Board**

<b><u>Professional Staff</u></b> <b><u>2<sup>nd</sup> Tues.</u></b>		<b><u>ZB Filing Deadline</u></b>	<b><u>ZB Notice Deadline</u></b>	<b><u>ZB Reg. Mtg.</u></b> <b><u>*1<sup>st</sup> Wed.</u></b> <b><u>6:00 pm</u></b>		<b><u>PB Filing Deadline</u></b>	<b><u>PB Reg Mtg.</u></b> <b><u>2<sup>nd</sup> Thurs.</u></b> <b><u>6:00 pm</u></b>
01/09/24		12/21/23	01/28/24	*02/06/24		01/04/24	02/08/24
02/13/24		01/29/24	02/25/24	03/06/24		02/08/24	03/14/24
03/12/24		02/26/24	03/24/24	*04/10/24		03/07/24	04/11/24
04/09/24		03/25/24	04/21/24	05/01/24		04/04/24	05/09/24
05/14/24		04/29/24	05/26/24	06/05/24		05/16/24	06/13/24
06/11/24		No Mtg.	No Mtg.	No Mtg.		No Mtg.	No Mtg.
07/09/24		06/24/24	07/28/24	08/07/24		06/27/24	08/08/24
08/13/24		07/29/24	08/25/24	09/04/24		08/15/24	09/12/24
09/10/24		08/26/24	09/22/24	*10/09/24		09/19/24	10/10/24
10/08/24		09/23/24	10/27/24	11/06/24		10/17/24	11/14/24
11/05/24**		10/28/24	11/24/24	12/04/24		11/21/24	12/12/24
12/10/24**		11/25/24	12/29/24	01/08/25 Reorg. & 1 <sup>st</sup> Reg. Mtg.		12/5/24	01/09/25 Reorg. & 1 <sup>st</sup> Reg. Mtg.

\* Amended Schedule

\*\* NJ League of Municipalities in Nov. and Thanksgiving & Dec. Holiday

- THE ZONING BOARD AND PLANNING BOARD MAY SCHEDULE SPECIAL MEETINGS DURING THE YEAR



You must publish a legal notice only once, in one of the designated newspapers below no less than ten (10) days before your scheduled public hearing.

Publish on or before:

See Meeting Dates Schedule for ZB Notice Deadline

**Designated Newspapers:**

Burlington County Times -  
(recommended)

One Oxford Valley  
2300 East Lincoln Highway  
Suite 500D  
Langhorne, PA 19047  
Telephone (215) 949-4032  
Email: [legals@thebct.com](mailto:legals@thebct.com)  
Office hours M-F  
Post Tuesday through Sunday

Central Record -

307 Destine Ave.  
Landsdale, PA 19446  
Telephone (215) 648-1066  
Email: [SJLegals@SJlocalnews.com](mailto:SJLegals@SJlocalnews.com)  
Post on Thursdays Only

Courier Post -

Cherry Hill Courier Post  
435 E Walnut St  
Green Bay, WI 54301  
Telephone (844) 590-5995  
Email: [cplegals@gannett.com](mailto:cplegals@gannett.com)  
Office hours M-F  
Posts 7 days

# Notice To Be Published in Official Newspaper

## TOWNSHIP OF MOUNT LAUREL ZONING BOARD OF ADJUSTMENT

A PUBLIC HEARING of Mount Laurel Township Zoning Board of Adjustment of the Township of Mount Laurel in the County of Burlington and the State of New Jersey, will be held WEDNESDAY, \_\_\_\_\_ Commencing at 6:00 p.m. in the Meeting Room of the Mount Laurel Municipal Center, 100 North Mount Laurel Road, Mount Laurel, New Jersey, on the appeal or application of the undersigned for variance or other relief so as to permit (be specific on all variances requested):

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and any other such variances and waivers as may be required as a result of review and recommendations by the board or its professional review staff, on the premises located at

\_\_\_\_\_ in an \_\_\_\_\_ zone and designated as Block \_\_\_\_\_ Lot \_\_\_\_\_ on the Mount Laurel Township Tax Map.

This matter is known as file number ZB# \_\_\_\_\_ in the Zoning Board of Adjustment record and is available for public inspection at the Zoning Board of Adjustment office during normal business hours.

Any interested party may appear at said hearing and participate therein in accordance with the rules of the Zoning Board of Adjustment.

\_\_\_\_\_  
Name of Applicant

\_\_\_\_\_  
Date of Publication

**NOTICE TO PROPERTY OWNERS OR AGENCIES**

TO (property owners name) \_\_\_\_\_

OWNER OF PREMISES (address) \_\_\_\_\_

MOUNT LAUREL TAX MAP BLOCK \_\_\_\_\_ LOT \_\_\_\_\_ PLEASE TAKE NOTICE:

That the undersigned has applied to the Board of Adjustment of Mount Laurel Township for a Variance from the terms of articles and Sections of the Zoning Ordinance so as to permit

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

and any other such variances and waivers as may be required as a result of review and recommendations by the board or its professionals.

This application also includes a request for (Subdivision\_\_\_) (Site Plan\_\_\_) (Conditional Use Approval\_\_\_) (Appeal\_\_\_) X where applicable – if not applicable, cross out this sentence or delete from notice on the premises of \_\_\_\_\_ located at \_\_\_\_\_

designated as Block \_\_\_\_\_ Lot(s) \_\_\_\_\_ on the Mount Laurel Township Tax Map. A public hearing will be held on \_\_\_\_\_20\_\_\_\_, at 6:00 p.m. in the Mount Laurel Township Court Room located at 100 Mount Laurel Road, at which time you may appear either in person or by an agent, or attorney and may present any objection which you may have to the granting of this application.

All documents relating to this application may be inspected by the public during normal business hours in the Office of the Secretary of the Board in the Township Municipal Center. .

This notice is sent to you by the applicant because the subject property is within 200 feet of property owned by you or is otherwise required by law.

Respectfully,

\_\_\_\_\_  
Applicant

SCHEDULE TO BE ATTACHED TO PROOF OF SERVICE OF NOTICE

File # \_\_\_\_\_

## LIST OF PROPERTY OWNERS AND AGENCIES SERVED

NOTICE: The list of required names and addresses shall be obtained from the most tax lists of the municipality. "This form shall be typewritten and shall clearly indicate the method of service. Each sheet must be certified by the person who served the notices. (If "Personal Service" is used, signature of each person served acknowledging receipt of the notice is required.)

NAME AND ADDRESS

TAX MAP DESIGNATION

SIGNATURE

This image shows a single sheet of white paper with horizontal blue or grey ruling lines. The lines are evenly spaced and run across the width of the page. There are approximately 20 lines visible. The paper appears to be a standard notebook page or a sheet of stationery. There is no handwriting or other markings on the page.

\*P.S. (Personal Service) CM. (Certified Mail)

I hereby certify that the above listed persons were actually served with notice of this hearing by me in the manner set forth above.

(To be signed by the person who served the notices.)

PROOF OF SERVICE OF NOTICE UPON PROPERTY OWNERS  
AND/OR PUBLIC AGENCIES

**MOUNT LAUREL TOWNSHIP ZONING BOARD OF ADJUSTMENT**

AFFIDAVIT OF SERVICE

STATE OF: NEW JERSEY

SS.

COUNTY OF: BURLINGTON

\_\_\_\_\_ of full age, being duly sworn according to law,  
deposes and says, that he/she resides at \_\_\_\_\_, Mount Laurel Township, County of  
Burlington, and State of New Jersey, and is the applicant in proceeding before the Board of Adjustment, Mount  
Laurel Township, New Jersey, and that he/she did on \_\_\_\_\_, 20\_\_\_\_, at least ten (10) days prior to  
hearing date, give personal notice to all property owners within 200 feet of the property and those public agencies  
required by law, affected by application ZB# \_\_\_\_\_ relating to the premises at \_\_\_\_\_  
\_\_\_\_\_.

Said notice was given either by handing a copy to the property owner, or by sending said notice by certified mail.  
copies of the receipts are attached hereto.

Notice was also published in the official newspaper of the Mt. Laurel Township as required by law.

Attached to this affidavit is a list of owners of property within 200 feet of the affected property who were served  
showing the lot and block numbers of each property as same appear on the municipal tax map, and also a copy of  
the certified list of such owners prepared by the Tax Assessor of the Municipality.

Also attached to this affidavit is a copy of the proof of publication of notice in the official newspaper of Mount  
Laurel Township.

Respectfully,

\_\_\_\_\_  
Signature of Applicant

Sworn to before me this \_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_

\_\_\_\_\_  
A Notary Public of New Jersey

MOUNT LAUREL TOWNSHIP ZONING BOARD OF ADJUSTMENT  
CONSENT TO EXTENSION OF TIME FOR DECISION

Re: Calendar Number \_\_\_\_\_

Date: \_\_\_\_\_

It appearing that, due to the complex nature of applicant's application for

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The Board of Adjustment will not be able to properly review the application by \_\_\_\_\_,  
20\_\_\_\_, when the statutory time of approval expires;

It is on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

Agreed by and between the applicant, \_\_\_\_\_,  
And the Board of Adjustment of the Township of Mount laurel that the time for decision shall  
be extended to \_\_\_\_\_ 20\_\_\_\_.

\_\_\_\_\_  
(Attorney for Applicant)

\_\_\_\_\_  
Secretary of the Board