

**CITY OF TRENTON PLANNING BOARD**

Form C- Application for Final Site Plan Approval  
(To be used in conjunction with the Application for Development Form A)

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THIS PORTION TO BE COMPLETED BY DIVISION OF PLANNING STAFF ONLY

Date Filed \_\_\_\_\_

Application #: \_\_\_\_\_

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

Application Fees: \_\_\_\_\_

Escrow Deposit: \_\_\_\_\_

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

Hearing Date \_\_\_\_\_

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**NOTE:**

**Two (2) copies of the completed applications along with five (5) copies of the site plans, subdivision plats and other supporting documentation must be filed with the Division of Planning for professional review.**

**1. APPLICANT INFORMATION**

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

Contact Person (if different): \_\_\_\_\_

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

Telephone: \_\_\_\_\_ Fax #: \_\_\_\_\_

Signature \_\_\_\_\_

**II. PRELIMINARY SITE PLAN APPROVAL INFORMATION**

Date of Preliminary Approval: \_\_\_\_\_

Indicate the conditions imposed upon the Applicant by the Planning Board and what measures have been taken to comply:

Conditions of Approval

- 1. \_\_\_\_\_
- 2. \_\_\_\_\_
- 3. \_\_\_\_\_
- 4. \_\_\_\_\_
- 5. \_\_\_\_\_
- 6. \_\_\_\_\_
- 7. \_\_\_\_\_
- 8. \_\_\_\_\_

Satisfied By

- 1. \_\_\_\_\_
- 2. \_\_\_\_\_
- 3. \_\_\_\_\_
- 4. \_\_\_\_\_
- 5. \_\_\_\_\_
- 6. \_\_\_\_\_
- 7. \_\_\_\_\_
- 8. \_\_\_\_\_

**III. FINAL SITE PLAN APPROVAL IS SOUGHT FOR**

All  Part

**OF THAT WHICH WAS GIVEN PRELIMINARY APPROVAL BY THE PLANNING BOARD.**

If partial approval is sought, state which portions of the project are being applied for final site plan approval through this application:

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

**IV. HAVE CONDITIONS IMPOSED BY THE CITY OF TRENTON FLOOD CONTROL, SOIL EROSION AND SEDIMENT CONTROL ORDINANCES BEEN COMPLIED WITH?**

Yes  No

If No, state status of approval: \_\_\_\_\_

**V. IF REQUIRED, HAS COUNTY APPROVAL BEEN GRANTED?**

Yes  No

If No, state status of approval: \_\_\_\_\_

**VI. CERTIFICATION**

I certify that the foregoing statements and the materials submitted are true. I further certify that I am the individual applicant or that I am an Officer of the Corporate applicant and that I am authorized to sign the application for the Corporation or that I am general partner of the partnership applicant.

Sworn to and subscribed before me this

\_\_\_\_\_ day of \_\_\_\_\_, 200 \_\_\_\_

\_\_\_\_\_  
**Name of Applicant (Please Print)**

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

**THIS FORM TO BE COMPLETED BY DIVISION OF PLANNING STAFF ONLY**

**RECOMMENDATION OF PLANNING DIVISION:**

In granting this Preliminary Development Application:

\_\_\_ We have no objection

\_\_\_ We object because of the following reasons:

\_\_\_\_\_

\_\_\_ We have no objection providing the attached conditions are imposed  
(See enclosed letter)

**ACTION OF TRENTON PLANNING BOARD:**

\_\_\_ Approved on \_\_\_\_\_ Vote: \_\_\_ In favor \_\_\_ Against \_\_\_ Abstain \_\_\_

\_\_\_ Disapproved on \_\_\_\_\_ Vote: \_\_\_ In favor \_\_\_ Against \_\_\_ Abstain \_\_\_

\_\_\_ Conditionally \_\_\_\_\_ Vote: \_\_\_ In favor \_\_\_ Against \_\_\_ Abstain \_\_\_

Approved on \_\_\_\_\_

Date(s) of Hearing \_\_\_\_\_

Date Resolution Memorialized \_\_\_\_\_

Date Decision Published \_\_\_\_\_

Date of Notice to Applicant (within 10 days) \_\_\_\_\_

**COMMENTS:**

\_\_\_\_\_

\_\_\_\_\_