

**TOWNSHIP OF MORRIS
BOARD OF ADJUSTMENT
CHECKLIST**

Applicant Name(s): _____

Property in Question (Block, Lot): _____

	YES	NO	Remarks
1. Name, address and telephone numbers of applicant(s)	<input type="checkbox"/>	<input type="checkbox"/>	
2. Address of property in question	<input type="checkbox"/>	<input type="checkbox"/>	
3. Zone in which located	<input type="checkbox"/>	<input type="checkbox"/>	
4. Block and Lot number of P.Q.	<input type="checkbox"/>	<input type="checkbox"/>	
5. Section(s) of the ordinance from which relief is requested	<input type="checkbox"/>	<input type="checkbox"/>	
6. Date of decision of denial from Zoning Officer	<input type="checkbox"/>	<input type="checkbox"/>	
7. Applicants' reasons for the Board to grant relief	<input type="checkbox"/>	<input type="checkbox"/>	
8. Specific facts showing that the relief sought can be granted without substantial detriment to the public good and will not substantially impair the intent and purpose of the Zone Plan and Zoning Ordinance	<input type="checkbox"/>	<input type="checkbox"/>	
9. Date of filing, nature of request and disposition of any previous applications involving the P.Q.	<input type="checkbox"/>	<input type="checkbox"/>	
10. Description of the proposed structure or use	<input type="checkbox"/>	<input type="checkbox"/>	
11. Statement as to whether the P.Q. are, or are not, serviced by municipal water and sewerage systems	<input type="checkbox"/>	<input type="checkbox"/>	
12. Size of lot in square feet	<input type="checkbox"/>	<input type="checkbox"/>	
13. Dimensions of lot	<input type="checkbox"/>	<input type="checkbox"/>	
14. Size of lot at street level	<input type="checkbox"/>	<input type="checkbox"/>	
15. Percentage of lot occupied by buildings	<input type="checkbox"/>	<input type="checkbox"/>	
16. Height of building, stories and feet	<input type="checkbox"/>	<input type="checkbox"/>	
17. Front and Rear yard depth	<input type="checkbox"/>	<input type="checkbox"/>	
18. Side yards, width (both)	<input type="checkbox"/>	<input type="checkbox"/>	
19. Side yard width abutting a side street on corner lot	<input type="checkbox"/>	<input type="checkbox"/>	
20. Prevailing front yard set-backs of adjoining lots	<input type="checkbox"/>	<input type="checkbox"/>	
21. Date of acquisition of property, and from whom	<input type="checkbox"/>	<input type="checkbox"/>	
22. Applicant or Owners own or under contract to purchase adjoining lands? <i>If yes continue to (22-a)</i>	<input type="checkbox"/>	<input type="checkbox"/>	
a.) Set forth block(s), and lot(s) number(s)	<input type="checkbox"/>	<input type="checkbox"/>	
23. Application accompanied by a separate application for:	<input type="checkbox"/>	<input type="checkbox"/>	
a.) Subdivision?	<input type="checkbox"/>	<input type="checkbox"/>	
b.) Site plan?	<input type="checkbox"/>	<input type="checkbox"/>	
c.) Conditional Use approval?	<input type="checkbox"/>	<input type="checkbox"/>	
<i>If answered yes to 23 (a--c), please see Planning Board Check List</i>			