

**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"/>	
<b><i>If answered yes to 23 (a--c), please see Planning Board Check List</i></b>			

**TOWNSHIP OF MORRIS**  
**SITE PLAN**  
**CHECKLIST**

Site Name(s) \_\_\_\_\_

Property in Question (Block, Lot) B7307, L2 &8  
 \_\_\_\_\_

	YES	NO	REMARKS
<b>1. Preparation</b>			
A. Professional Engineer	<input type="checkbox"/>	<input type="checkbox"/>	
B. Land Surveyor	<input type="checkbox"/>	<input type="checkbox"/>	
C. Architect	<input type="checkbox"/>	<input type="checkbox"/>	
D. Planner	<input type="checkbox"/>	<input type="checkbox"/>	
E. Scale 1" = 50'	<input type="checkbox"/>	<input type="checkbox"/>	
<b>2. Required Information</b>			
A. Dates	<input type="checkbox"/>	<input type="checkbox"/>	
1. Date of Preparation	<input type="checkbox"/>	<input type="checkbox"/>	
2. Revision Dates	<input type="checkbox"/>	<input type="checkbox"/>	
B. Structures			
1. Layout of Proposed Buildings	<input type="checkbox"/>	<input type="checkbox"/>	
2. Elevation Plan	<input type="checkbox"/>	<input type="checkbox"/>	
C. Key Map			
1. Surrounding Areas	<input type="checkbox"/>	<input type="checkbox"/>	
2. Existing Surrounding Streets	<input type="checkbox"/>	<input type="checkbox"/>	
D. Title of Development			
1. North Arrow	<input type="checkbox"/>	<input type="checkbox"/>	
2. Scale	<input type="checkbox"/>	<input type="checkbox"/>	
3. Block and Lot Numbers	<input type="checkbox"/>	<input type="checkbox"/>	
4. Name and Address of Owner	<input type="checkbox"/>	<input type="checkbox"/>	
5. Name, Address, License Number & Seal of Preparer of Plat	<input type="checkbox"/>	<input type="checkbox"/>	
E. Signs			
1. Location	<input type="checkbox"/>	<input type="checkbox"/>	
2. Dimensions	<input type="checkbox"/>	<input type="checkbox"/>	
3. Details	<input type="checkbox"/>	<input type="checkbox"/>	
F. Lot			
1. Line Dimensions, in feet and decimals	<input type="checkbox"/>	<input type="checkbox"/>	
2. Bearings, to nearest 10 seconds	<input type="checkbox"/>	<input type="checkbox"/>	
3. Error of Closure, 1:10,000	<input type="checkbox"/>	<input type="checkbox"/>	
G. Zoning			
1. Show Zoning of Site	<input type="checkbox"/>	<input type="checkbox"/>	
2. Zoning of Adjacent Parcels	<input type="checkbox"/>	<input type="checkbox"/>	
3. Zoning within 200 feet	<input type="checkbox"/>	<input type="checkbox"/>	
H. Property			
1. Building Setback Lines (as per zoning)	<input type="checkbox"/>	<input type="checkbox"/>	
2. Easements (existing or proposed)	<input type="checkbox"/>	<input type="checkbox"/>	
3. Right-of-Way	<input type="checkbox"/>	<input type="checkbox"/>	

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	YES	NO	REMARKS
I. Deed Restrictions, if any	<input type="checkbox"/>	<input type="checkbox"/>	
J. Existing Streets Abutting Property	<input type="checkbox"/>	<input type="checkbox"/>	
1. Distances	<input type="checkbox"/>	<input type="checkbox"/>	
K. Existing Structures			
1. Buildings	<input type="checkbox"/>	<input type="checkbox"/>	
2. Walls	<input type="checkbox"/>	<input type="checkbox"/>	
3. Fences	<input type="checkbox"/>	<input type="checkbox"/>	
4. Culverts	<input type="checkbox"/>	<input type="checkbox"/>	
5. Bridges	<input type="checkbox"/>	<input type="checkbox"/>	
6. Roadways	<input type="checkbox"/>	<input type="checkbox"/>	
7. Spot Elevations of All of the Above	<input type="checkbox"/>	<input type="checkbox"/>	
8. Structure to be Removed Shall be Indicated as Such	<input type="checkbox"/>	<input type="checkbox"/>	
L. Storm Drainage			
1. Location	<input type="checkbox"/>	<input type="checkbox"/>	
2. Pipe size	<input type="checkbox"/>	<input type="checkbox"/>	
3. Grades	<input type="checkbox"/>	<input type="checkbox"/>	
4. Direction of Flow	<input type="checkbox"/>	<input type="checkbox"/>	
M. Contours			
1. Existing --- show as dashed lines	<input type="checkbox"/>	<input type="checkbox"/>	
a. Slopes less than 10 %, 2 feet intervals	<input type="checkbox"/>	<input type="checkbox"/>	
b. Slopes greater than 10 %, 5 feet intervals	<input type="checkbox"/>	<input type="checkbox"/>	
2. Proposed – Shown as Solid Lines	<input type="checkbox"/>	<input type="checkbox"/>	
N. Steep Slopes Analysis			
1. Map (57-160(4) )	<input type="checkbox"/>	<input type="checkbox"/>	
O. Existing Natural Features			
1. Rock Outcrops	<input type="checkbox"/>	<input type="checkbox"/>	
2. High Points	<input type="checkbox"/>	<input type="checkbox"/>	
3. Water Courses	<input type="checkbox"/>	<input type="checkbox"/>	
4. Depressions	<input type="checkbox"/>	<input type="checkbox"/>	
5. Ponds, Marshes, Swamps	<input type="checkbox"/>	<input type="checkbox"/>	
6. Wooded Areas	<input type="checkbox"/>	<input type="checkbox"/>	
7. Flood Elevations, if available from FIRM	<input type="checkbox"/>	<input type="checkbox"/>	
P. Survey	<input type="checkbox"/>	<input type="checkbox"/>	
1. Prepared by License N.J. Land Surveyor	<input type="checkbox"/>	<input type="checkbox"/>	
Q. Public – Rights-of –Way			
1. Proposed Easements	<input type="checkbox"/>	<input type="checkbox"/>	
2. Streets	<input type="checkbox"/>	<input type="checkbox"/>	
a. Profile, with utilities, type, size, etc.	<input type="checkbox"/>	<input type="checkbox"/>	
b. Cross Sections	<input type="checkbox"/>	<input type="checkbox"/>	
R. Land			
1. Use of Land and Building	<input type="checkbox"/>	<input type="checkbox"/>	
2. Proposed Grades at Building	<input type="checkbox"/>	<input type="checkbox"/>	
3. Building Floor Space	<input type="checkbox"/>	<input type="checkbox"/>	

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	YES	NO	REMARKS
4. Est. Number of:	<input type="checkbox"/>	<input type="checkbox"/>	
a. Employees	<input type="checkbox"/>	<input type="checkbox"/>	
b. Housing Units	<input type="checkbox"/>	<input type="checkbox"/>	
S. Traffic			
1. Ingress	<input type="checkbox"/>	<input type="checkbox"/>	
2. Egress	<input type="checkbox"/>	<input type="checkbox"/>	
3. Driveway Size and Location	<input type="checkbox"/>	<input type="checkbox"/>	
4. Acceleration and/or Deceleration Lanes (if required)	<input type="checkbox"/>	<input type="checkbox"/>	
5. Public Improvements	<input type="checkbox"/>	<input type="checkbox"/>	
a. Curbing	<input type="checkbox"/>	<input type="checkbox"/>	
b. Sidewalk	<input type="checkbox"/>	<input type="checkbox"/>	
6. Parking	<input type="checkbox"/>	<input type="checkbox"/>	
a. Parking Stalls with Dimensions	<input type="checkbox"/>	<input type="checkbox"/>	
b. Access Aisles	<input type="checkbox"/>	<input type="checkbox"/>	
T. Off Street Parking			
1. Bays	<input type="checkbox"/>	<input type="checkbox"/>	
2. Barriers	<input type="checkbox"/>	<input type="checkbox"/>	
3. Aisles	<input type="checkbox"/>	<input type="checkbox"/>	
4. Loading Areas	<input type="checkbox"/>	<input type="checkbox"/>	
U. Water and Sewer Location			
1. Water Mains, Valves, Hydrants	<input type="checkbox"/>	<input type="checkbox"/>	
2. Sewer Mains, Manholes, Connections	<input type="checkbox"/>	<input type="checkbox"/>	
V. Lighting			
1. Intensity, in foot candles	<input type="checkbox"/>	<input type="checkbox"/>	
2. Location	<input type="checkbox"/>	<input type="checkbox"/>	
3. Power & Time of Illumination	<input type="checkbox"/>	<input type="checkbox"/>	
4. Direction of Illumination	<input type="checkbox"/>	<input type="checkbox"/>	
5. Type and Standard to be Employed	<input type="checkbox"/>	<input type="checkbox"/>	
W. Planting Plan			
1. Size and Type to be Employed	<input type="checkbox"/>	<input type="checkbox"/>	
2. Natural Vegetation to Remain	<input type="checkbox"/>	<input type="checkbox"/>	
3. Screening & Buffer Zones to be Employed (if required)	<input type="checkbox"/>	<input type="checkbox"/>	
X. Storm Drainage System			
1. Existing Drainage within 500 feet.	<input type="checkbox"/>	<input type="checkbox"/>	
2. Areas of:	<input type="checkbox"/>	<input type="checkbox"/>	
a. Paving	<input type="checkbox"/>	<input type="checkbox"/>	
b. Grass	<input type="checkbox"/>	<input type="checkbox"/>	
c. Wooded Areas	<input type="checkbox"/>	<input type="checkbox"/>	
d. Other Contributing to Drainage	<input type="checkbox"/>	<input type="checkbox"/>	
Y. Other Information and Data as Required by Planning Board	<input type="checkbox"/>	<input type="checkbox"/>	
<b>3. Flood Plain Required Information</b>			
A. Contours	<input type="checkbox"/>	<input type="checkbox"/>	
1. Existing	<input type="checkbox"/>	<input type="checkbox"/>	
2. Proposed	<input type="checkbox"/>	<input type="checkbox"/>	
3. Sloped less than 2% intervals of 1 feet.	<input type="checkbox"/>	<input type="checkbox"/>	

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	<b>YES</b>	<b>NO</b>	<b>REMARKS</b>
B. Elevations	<input type="checkbox"/>	<input type="checkbox"/>	
1. Building Corners	<input type="checkbox"/>	<input type="checkbox"/>	
C. Structure			
1. Elevation of Lowest Point	<input type="checkbox"/>	<input type="checkbox"/>	
D. Subsurface Conditions (if required)	<input type="checkbox"/>	<input type="checkbox"/>	
E. Flood proofing of Structures	<input type="checkbox"/>	<input type="checkbox"/>	
1. Elevation of Floodproofing	<input type="checkbox"/>	<input type="checkbox"/>	
F. Floodproofing Certification	<input type="checkbox"/>	<input type="checkbox"/>	
1. Prof. Engineer	<input type="checkbox"/>	<input type="checkbox"/>	
2. Reg. Architect	<input type="checkbox"/>	<input type="checkbox"/>	
G. Base Flood Elevation Data:	<input type="checkbox"/>	<input type="checkbox"/>	
1. FIRM- 100 year storm	<input type="checkbox"/>	<input type="checkbox"/>	