



## ROCKAWAY TOWNSHIP

65 MOUNT HOPE ROAD, ROCKAWAY, NEW JERSEY 07866

### SOIL DISTURBANCE PERMIT APPLICATION

All applications are subject to compliance with the requirements of the Township of Rockaway Soil Protection Ordinance, Township of Rockaway Code Section 20-1, et seq. Please submit twenty-five copies of the application and accompanying documents, along with the application fee if the application will be reviewed by the Township Engineer and the Planning Board or Board of Adjustment. Please submit four copies of the application and accompanying documents along with the application fee if only the Township Engineer will review the application.

1. Applicant's Name: \_\_\_\_\_
2. Applicant's Address: \_\_\_\_\_
3. Owner's Name (if different from Applicant): \_\_\_\_\_
4. Owner's Address: \_\_\_\_\_
5. Location of property that is subject of soil disturbance:  
Block: \_\_\_\_\_ Lot: \_\_\_\_\_  
Address: \_\_\_\_\_
6. Description of property that is subject of soil disturbance: \_\_\_\_\_  
\_\_\_\_\_
7. Purpose for disturbing the soil: \_\_\_\_\_  
\_\_\_\_\_
8. Kind and quantity (in cubic yards) of all soil to be disturbed (including movement, importation and exportation): \_\_\_\_\_
9. Will soil be exported from the site?  Yes  No  
If so, the quantity, in yards, of soil to be removed: \_\_\_\_\_  
If so, the destination of the exported soil: \_\_\_\_\_
10. Will soil be imported to the site?  Yes  No  
If so, the quantity, in cubic yards, of soil to be imported: \_\_\_\_\_  
If so, the source of the imported soil: \_\_\_\_\_
11. Proposed date of commencement of the soil disturbance: \_\_\_\_\_
12. Proposed date of completion of the soil disturbance: \_\_\_\_\_
13. Name, address and telephone number of the person having direct charge or supervision over the soil disturbance operation:



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

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

Phone #: \_\_\_\_\_ Email: \_\_\_\_\_

**Please note, in accordance with the Soil Protection Ordinance, a Contour Map, earthwork calculations, application fee, permit fee and traffic plan, when applicable, must be submitted with the application. Please see attached schedule for fees.**

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

\_\_\_\_\_  
Township Clerk's Signature

Date Received by Township Clerk: \_\_\_\_\_

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**FOR TOWNSHIP USE ONLY**

Application Fee Paid: \_\_\_\_\_ Yes \_\_\_\_\_ No      Application Fee: \_\_\_\_\_

Permits Fees Paid: \_\_\_\_\_ Yes \_\_\_\_\_ No      Permit Fee: \_\_\_\_\_

Contour Map Received: \_\_\_\_\_ Yes \_\_\_\_\_ No

Traffic Plan Received: \_\_\_\_\_ Yes \_\_\_\_\_ No      \_\_\_\_\_ Not Applicable

Bond Required: \_\_\_\_\_ Yes \_\_\_\_\_ No

Insurance Required: \_\_\_\_\_ Yes \_\_\_\_\_ No

Dates of Inspections: \_\_\_\_\_

Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Constructed as per contour map: \_\_\_\_\_ Yes \_\_\_\_\_ No

Quantity of soil disturbed upon completion of soil disturbance activities: \_\_\_\_\_

Additional fees owed in accordance with the total quantity of soil disturbed upon completion of soil disturbance activities: \_\_\_\_\_