

- Re-License Application (requires completion of items 1 thru 8)
- License Application requiring 5-year Compliance Review (must complete entire application)

TOWNSHIP OF MIDDLE GRAVEL PIT LICENSE

1. Name of Applicant: _____
2. Business Address: _____
3. Phone #: (____) _____ - _____
4. Location of Pit-Tax Map Block _____ Lot(s) _____ Block _____ Lot(s) _____
5. Acreage of area sought to be licensed: _____
 - a. Size of existing excavation: _____
 - b. Size of proposed excavation: _____
6. Full name and address of recorded owner: _____
7. How long has this location been used as a pit? _____
8. Attach following with application:
 - a. Copy of Certification from Cape Atlantic Soil Conservation District
Mining Operation Number _____
 - b. Personal Guaranty (good for a period of 10 years) or Surety Bond (if approved by
Resolution of the governing body) # _____
 - c. \$ _____ FEE: \$50/acre. Minimum fee shall be \$200. Maximum fee shall be \$600.
(Please round to the next high whole number of acres.)

ALL OF THE ITEMS LISTED ABOVE MUST ACCOMPANY APPLICATION OR THE ENTIRE APPLICATION
WILL BE RETURNED.

9. For purposes of the 5-year compliance review the following items must be attached:
 - a. Topographic map at a scale of 1 inch equals 400 feet showing the proposed dimensions,
location and operations on the site
 - b. A USGS quadrangle map showing the dimensions of the property and an area of at least
1,000 feet beyond such boundary in all directions
 - c. The location, size and intended use of all buildings or structures
 - d. The location of all streams, wetlands and significant vegetation
 - e. The location of all existing and proposed access roads and perimeter roads, including
railroad rights of way
 - f. A soil map
 - g. A reclamation plan
 - h. A personal guaranty or surety bond (if approved by governing body)
 - i. A current certified list of property owners within 500 feet
 - j. Certification of served notice to property owners with 500 feet
 - k. A statement of areas that have been mined and reclaimed since the previous
review/approval

ALL OF THE ITEMS LISTED ABOVE MUST ACCOMPANY APPLICATION OR THE ENTIRE APPLICATION
WILL BE RETURNED.

Signed _____
Applicant

Dated _____

(For Township Use Only)

Municipal Engineer's Inspection _____
Date

Approval _____
Initial

Zoning Officer _____
Date

Approval _____
Initial