

**Township of Washington  
Bergen County, New Jersey  
Application for Soil Movement Permit**

Application Date: \_\_\_\_\_

1. Township of Washington, Tax Assessment Map, description of land which soil permit is for:

Site Address: \_\_\_\_\_  
Block(s): \_\_\_\_\_ Lot(s): \_\_\_\_\_

2. Property Owner:

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

3. Applicant (if different from owner):

Name: \_\_\_\_\_  
Company: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_ FAX: \_\_\_\_\_

4. Is Applicant (circle one):

Developer                      Individual  
Partnership                    Excavator  
Corporation                    Other (specify) - \_\_\_\_\_

5. If Partnership:

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_ FAX: \_\_\_\_\_

6. If Corporation, Name of Registered Agent:

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_ FAX: \_\_\_\_\_

7. Party Responsible for Notices and Correspondence:

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_ FAX: \_\_\_\_\_

8. Purpose of Soil Operation:

\_\_\_\_\_ To grade land by moving soil from WITHIN the property lines  
\_\_\_\_\_ To grade land by removing soil to place OUTSIDE property lines (specify)  
          a. Place to which soil will be removed \_\_\_\_\_  
          b. Kind of soil to be removed \_\_\_\_\_  
\_\_\_\_\_ To grade land by filling in  
\_\_\_\_\_ Other (specify) \_\_\_\_\_

9. Type of Soil to be removed:

Top Soil	_____	Cubic yards
Sub Soil	_____	Cubic yards
Sand	_____	Cubic yards
Gravel	_____	Cubic yards
Other (specify)	_____	Cubic yards

10. Total quantity of soil to be moved:

Excavation	_____	Cubic yards
Fill	_____	Cubic yards

11. Does topographical map required by ordinance 82-3 accompany application?

\_\_\_\_\_ yes \_\_\_\_\_ no

12. Date proposed work will be completed in accordance with topographical map and requirements of ordinance # 82-3: \_\_\_\_\_

13. Provide a statement as to how the moving of the soil will affect all trees with a diameter of six (6) inches or more: \_\_\_\_\_

14. Signature of owner of property on date of this application:

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

Signature: \_\_\_\_\_

Soil Movement Application Revised Oct 2007