



Township of Barnegat

900 West Bay Avenue

Barnegat, NJ 08005

609-698-0080 x 148

Department of Engineering

COMMERCIAL SITE MAINTENANCE PERMIT

(For Office Use Only)

Date of Application: _____ Permit No. : _____

Applicant: _____ Owner _____ Tenant _____ Contractor _____ Property Manager

Property Owner/Applicant _____

Address: _____

Phone number(s): _____

Email: _____

Contractor: _____

Address: _____

Phone number(s): _____

Email: _____

Work Site Location: _____

Block(s) _____ **Lot(s):** _____

Please check the corresponding box and fill out the appropriate section(s) that follow:

☐ **Sealcoat/Restripe**

See Part A

☐ **Asphalt Overlay**

See Part B

☐ **Other**

See Part C

Written explanation of scope of work:

Signature of Applicant: _____ Date: _____

Signature of Contractor: _____ Date: _____

**PLEASE MAKE SURE ALL SECTIONS ARE COMPLETED.
INCOMPLETE PERMITS WILL NOT BE REVIEWED**

PART A - SEALCOAT/RESTRIPE

Requirements:

- ☐ 1) Survey of Approved Site Plan of property, drawn to a minimum scale of 1"=50' showing Existing Lot Striping, Handicapped Accommodations, Drainage and Grading and Dimensions. Survey should also show all restricted use areas (i.e. easements, wetlands)

- ☐ 2) Written explanation of scope of work:

- ☐ 3) Handicapped Striping/Signage Compliant with Current Federal ADA Standards
 - ☐ Yes
 - ☐ No (*CONFORMANCE REQUIRED* See Attached Example)
***Striping Must be Reviewed and Approved Prior to Proceeding**

- ☐ 4) Start of Work Date: _____

- ☐ 5) Approximate Completion of Work Date: _____

- ☐ 6) Outside Agency Approvals (where required)
 - ☐ NJDEP _____
(type of permit, permit number and date)

 - ☐ County Soil District _____
(permit number and date)

 - ☐ Other _____

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Permit Fees Nonrefundable

Fees: 1) \$150

Amount: \$ _____

Paid On: _____

Check No. _____

Received By: _____

2) Escrow & Inspection Fees

TYPE

☐ Plan Review

Amount: \$ _____ Paid On: _____

☐ Inspection (W-9)

Amount: \$ _____ Paid On: _____

☐ Bond

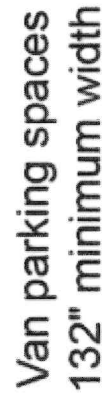
Amount: \$ _____ Paid On: _____

The above stated party is authorized to perform the grading and/or clearing work as described above. All work shall be performed in conformance with all applicable Barnegat Township ordinances.

Approved _____
Signature of Twp. Engineer or agent Print Name Date

Conditions: _____

**Sign with access
symbol and text that
reads “van-accessible”**



Parking Spaces and Access Aisles