

OFFICIAL USE ONLY
NJEMS Pre-Review Form

Program Interest #: _____ - _____ - _____ Class code: _____ Activity # _____

Type: _____ Component Type: _____

Proposed activity _____

Date Received: __/__/__ 20th Due Date : __/__/__ 90th Due Date : __/__/__

PRO _____ Points _____

Alternate PI # (xref #'s) _____ ASU: _____ ASU Date : __/__/__

Information Required for Highlands Jurisdictional Determination

Applicant name: _____

Address: _____

Agent: _____

Address: _____

Daytime Telephone Number: _____

PROJECT LOCATION:

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

Municipality: _____ **County:** _____

Site Address (or nearest crossroads): _____

PLEASE ATTACH A COPY OF A LOCATION MAP, COPY OF THE PORTION OF THE USGS QUAD MAP THAT SHOWS THE SITE (PLEASE INDICATE SITE ON MAP), A COPY OF THE TAX MAP AND, IF AVAILABLE, PHOTOGRAPHS OF THE EXISTING PROPERTY. SEND TO:

New Jersey Department of Environmental Protection
Land Use Regulation Program
Mail Code 501-02A
PO Box 420
Trenton, NJ 08625-0420