



APPLICATION FOR  
OPEN SPACE PRESERVATION TRUST FUND

Atlantic County Division of Parks & Recreation  
Office of Policy and Planning

For County Use Only  
Date Received: \_\_\_\_\_  
Offering Number: \_\_\_\_\_  
App'd: \_\_\_\_\_  
Denied: \_\_\_\_\_

Contact:  
Mr. Barry Hackett  
Office of Land Acquisition

1. Property Owner's Name \_\_\_\_\_ 2. Phone: \_\_\_\_\_  
3. Co-owner's Name \_\_\_\_\_ 4. Phone: \_\_\_\_\_  
5. Property Owner's Street Address \_\_\_\_\_  
6. City, State, Zip Code \_\_\_\_\_

7. Municipality \_\_\_\_\_ 8. Total Acreage \_\_\_\_\_

9. Tax Block # \_\_\_\_\_ 10. Tax Lot # \_\_\_\_\_ 11. Wetland Acreage \_\_\_\_\_

12. Nearest Street or Road \_\_\_\_\_ 13. Mun. Zoning District \_\_\_\_\_

14. Are there any homes located on the Property? \_\_\_\_\_ Yes \_\_\_\_\_ No

15. If yes, how many? \_\_\_\_\_ 16. Does the site have water access? \_\_\_\_\_

17. Are there any other buildings on the Property? \_\_\_\_\_ Yes \_\_\_\_\_ No

18. If yes, how many and what are they used for? \_\_\_\_\_

19. Describe any commercial activities taking place on this Property:  
\_\_\_\_\_

20. Are there any easements or deed restrictions affecting the use of this Property?

\_\_\_\_\_ Yes \_\_\_\_\_ No

21. If Yes, please describe: \_\_\_\_\_

22. Is there a mortgage on this Property? \_\_\_\_\_ Yes \_\_\_\_\_ No

23. If yes, please list all mortgages that are liens against this Property, provide the original amount and approximate balance: \_\_\_\_\_

24. Have you or are you in the process of pursuing any subdivision approvals on the premises?

\_\_\_\_\_ Yes \_\_\_\_\_ No

Date of Preliminary Approvals: \_\_\_\_\_

Date of Final Approvals: \_\_\_\_\_

Please provide documentation of approvals.

(continued on next page)

- 25. Is the Property currently listed for sale with a realtor? \_\_\_\_\_ Yes \_\_\_\_\_ No
- 26. If Yes, please provide the name and address of the realtor: \_\_\_\_\_  
\_\_\_\_\_
- 27. List any outstanding leases or rental agreements in effect: \_\_\_\_\_  
\_\_\_\_\_
- 28. What is the current asking price for the Property? \_\_\_\_\_  
\*NOTE: This is for informational purposes only and is non-binding. The County may hire an appraiser to determine fair market value.
- 29. What is the current assessed value? \_\_\_\_\_
- 30. Are there known or suspected hazard waste deposits on site? \_\_\_\_\_ Yes \_\_\_\_\_ No
- 31. Do you authorize a person to act as your representative in all matters pertaining to this application?  
\_\_\_\_\_ Yes \_\_\_\_\_ No
- 32. Name of Representative: \_\_\_\_\_
- 33. Representative's Street Address: \_\_\_\_\_
- 34. City, State, Zip Code: \_\_\_\_\_
- 35. Signature of Representative: \_\_\_\_\_

IS THE FOLLOWING INFORMATION ATTACHED

- 36. Tax Maps: \_\_\_\_\_ Yes \_\_\_\_\_ No      37. Copy of Title Insurance Policy: \_\_\_\_\_ Yes \_\_\_\_\_ No
- 38. Deed of Property: \_\_\_\_\_ Yes \_\_\_\_\_ No      39. Survey: \_\_\_\_\_ Yes \_\_\_\_\_ No

40. I hereby certify that the information included in this application is true, that I am the legal owner of the Property described above, that I have marketable title to the Property and that I have the legal right to sell the Property.

I hereby authorize the staff of County of Atlantic to conduct such site inspections on the Property as are necessary to review this application.

\_\_\_\_\_  
Signature of Owner  
(Applicant)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Co-owner  
(Co-Applicant)

\_\_\_\_\_  
Date