

STATE OF NEW JERSEY
COAH-RESIDENTIAL DEVELOPMENT FEE CERTIFICATION

Section A. (To be completed by Developer):

Developer

Name of Developer _____

Address _____

Phone _____ Fax _____ E-mail _____

Property Location

County _____ Municipality _____ Block _____ Lot _____

Street Address _____

Construction Permit Application Number _____

Preliminary or Final Approval Date _____

Signature of Developer _____

Name: _____

Title: _____ Date _____

Section B. (To be completed by the assessor):

ESTIMATED ASSESSED VALUE div. RATIO = EST. EQUAL. VALUE

EST. EQUAL. VALUE. X _____ % = _____ X 50% = EST. FEE _____

SIGNATURE TAX ASSESSOR _____ DATE _____

FINAL ASSESSED VALUE _____ RATIO _____ FINAL EQU. VALUE _____

Final equal value X _____ % = Final Fee - Estimated Fee = Bal of Fee

SIGNATURE TAX ASSESSOR _____ Date _____

Section C. (to be completed by Municipality)

Estimated payment amount \$ _____

Rec'vd by _____ Signature _____ Date _____

Final Payment Amonut \$ _____

Rec'vd by _____ Signature _____ Date _____