

**GATEWAY INFORMAL HEARING APPLICATION
TOWNSHIP OF WALL
2700 ALLAIRE ROAD
WALL, NJ 07719**

Applicant's Name: _____

Address: _____

Phone#: _____ Email: _____

Attorney for Applicant (if any): _____

Address: _____ Zip Code: _____

Phone#: _____ Email: _____

Applicant is property (check one): Owner _____ Contract Purchaser _____

Property Address: _____

Block: _____ Lot: _____ Existing Use: _____

Proposed Use and/or Construction:

Submit five (5) folded copies of this application, site plan, preliminary architectural plan, subdivision plan and any other information pertinent to the proposal.

Submit one PDF copy of plan to srose@townshipofwall.com .

Gateway Informal Hearings are on the first Monday of the month in Conference Room B.

Hearing Date and Time (for office use only):
