

**BOROUGH OF RINGWOOD
60 MARGARET KING AVENUE
RINGWOOD, NEW JERSEY 07456**

APPLICATION FOR SOIL MOVEMENT PERMIT

Application # _____ Filed: _____

No. of Cubic Yards _____

Minor - Less than 500 Cubic Yards Minimum Fee (Minor) \$50.00

Major - 500 Cubic Yards or More Fee: \$ _____
See Attached Ordinance

Paid: \$ _____

TO: BOROUGH OF RINGWOOD

A. Application is hereby made for a Soil Movement Permit pursuant to the provisions of an ordinance entitled THE SOIL MOVEMENT ORDINANCE OF THE BOROUGH OF RINGWOOD.

1. Name and address of applicant:

Name _____ Phone _____

Address _____

2. Location where work is to be performed:

Street _____ Block _____ Lot _____

3. Name and address of property owner on date of this application:

4. What is the relationship of the applicant and owner:

5. What interest does the applicant have in the land in question?

6. What is the purpose for moving the soil?

To grade land by moving soil within property lines.

To grade land by removing soil outside property line.

To grade land by filling in.

Other (Specify) _____

7. Kind of soil to be moved:

<input type="checkbox"/>	Topsoil	<input type="checkbox"/>	Cubic Yards
<input type="checkbox"/>	Subsoil	<input type="checkbox"/>	Cubic Yards
<input type="checkbox"/>	Sand	<input type="checkbox"/>	Cubic Yards
<input type="checkbox"/>	Gravel	<input type="checkbox"/>	Cubic Yards
<input type="checkbox"/>	Other	<input type="checkbox"/>	Cubic Yards

8. Total quantity of soil to be moved:

_____ Cubic Yards

9. In case of removal, the address to where the soil is going.

10. On what date will proposed work be completed in accordance with topographical map and requirements of ordinance entitled soil mining:

11. What will be the hours and days of operation:

12. Name and address of the excavator, contractor or the person having express charge, supervision and control of the proposed excavation work:

13. Name and address of the person to have control of the operation of hauling away the excavated material:

14. Names and addresses of all persons having an interest in any proceeds which may be derived from the sale or disposal of excavated material:

15. Number, capacity, type and description of each piece of equipment to be used in the operation and the number of truck loads to be removed:

16. The routes over which the material will be transported and the method of traffic control:

17. Method of abating noise and dust in the operation:

18. Number of trees to be removed: _____

19. The means of assuring lateral support and preventing erosion, floods, the washing of silt into the streams:

20. The means of protection downstream properties from the effects of the operation:

21. **In the case of any importation of soil,**

The attached **Form SI-1** must be completed and signed by both the person supplying the soil, and the person receiving/placing the soil.

If, in the opinion of the Borough Engineer this information or a physical examination of the imported soil shall indicate any reasonable basis therefor, the Borough Engineer, may require a testing of the soil to be imported by a soil consultant or environmental consultant prior to any action on the application.

The Borough Engineer, or his designee, is granted authority to require groundwater and soil testing of the site from where soil is being removed or the site to which soil has been imported.

B. Accompanying the application for Major Soil Movement Permit shall be eight (8) copies of a topographical map at a scale of not less than 1" = 50', and showing contour intervals at five (5) feet for grades of ten (10) percent or greater, and contour intervals at two (2) feet for grades of less than ten (10) percent. The map shall be prepared and certified by a New Jersey licensed engineer and shall show:

1. The present grades on a 100 foot grid layout.
2. The proposed grades at said points when the work has been completed.
3. The quantity, in cubic yards, of soil involved in the work.
4. The grades of all abutting streets and lots.
5. Proposed slopes and lateral supports.
6. Present and proposed surface water drainage.
7. All areas within 100 feet of that portion of the property which will be involved in the soil movement activities, including trees and wooded areas therein.
8. Such other pertinent data as the Council may hereafter by resolution require.

STATE OF NEW JERSEY
COUNTY OF PASSAIC

____ of full age, being duly sworn according to law on his oath, deposes and says the above information is given pursuant to the SOIL MOVEMENT ORDINANCE; that he is authorized to execute the application for a SOIL MOVEMENT PERMIT to the BOROUGH CLERK and that the statements contained in said application are true.

Applicant's Signature

Sworn to before me this
____ day of _____, 20____.

Notary Public

FORM SI-1 ACCEPTABLE SOIL/FILL MATERIAL CERTIFICATION FORM

Instructions: The supplier shall make the acceptability determination at the site of soil/fill origin and will complete Parts 1 and 2 of this form. Part 3 will be completed by the person receiving the material to be used as acceptable soil/fill material.

ACCEPTABLE SOIL/FILL: *Non-water-soluble, non-decomposable, inert solids such as soil, subsoil, topsoil, sand, clay, loam, gravel, humus, rock, concrete, brick, glass, and/or clay or ceramic products, free of construction/demolition debris, garbage, refuse, or sludge and not containing concentrations of one or more contaminants that exceed the DEP's Residential Direct Contact Soil Remediation Standards or Non-Residential Direct Contact Soil Remediation Standards, whichever is more stringent, as set forth in N.J.A.C. 7:26D, Remediation Standards.*

Part 1: Supplier of soil/fill material information

Date: _____

Name (print): _____ Title: _____

Company Name: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Phone #: _____ Email Address: _____

Part 2: Source of acceptable soil/fill material site information

Source Site Name: _____

Past Site Name(s) if known: _____

Street Address: _____

Block _____ Lot(s) _____

City: _____ State: _____ Zip: _____

Brief history of the source property, including all property uses:

1. Has the source property ever been known or suspected to be contaminated? _____

2. Do historical operations at the property reflect or suggest the potential for radiological contaminants? _____

3. Are there naturally occurring radiological materials known or suspected at the source property? _____

If applicable, the date soil/fill material was subject to analytical testing (provide copies):

If analytical results are not provided, justification for determining the soil/fill is acceptable without the need for analytical results: _____

Certification

I, the undersigned, certify under penalty of law, that the information provided in Parts 1 and 2 of this form is true and correct to the best of my knowledge and that the soil/fill material meets the above definition of acceptable soil/fill. I also certify, based upon visual inspection, that the soil material does not contain solid waste, debris, any free liquid other than water, obvious signs of staining or discoloration, and that it will not create a public nuisance such as, but not limited to, odors.

Signature: _____

Part 3: Person receiving or placing acceptable soil/fill material

Date: _____

Name (print): _____ Title: _____

Company Name: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Phone #: _____

Email Address: _____

Physical address of soil/fill placement: _____

Block _____ Lot(s) _____

City: _____ State: _____ Zip: _____

Purpose for importing soil/fill: _____

Quantity, in cubic yards, of acceptable soil/fill material to be imported or placed: _____

Anticipated date of placement: _____

Anticipated date of final grading: _____

Anticipated date of securing the deposited fill (seeding, macadam, etc.): _____

Certification

I, the undersigned, certify under penalty of law that the information provided is true and correct to the best of my knowledge, information and belief.

Signature: _____