Borough of Stone Harbor Residential Development Fee Certification

SECTION A (To be completed by Owner):										
Name of Owner:										
Mailing Address:										
Phone:		Fax:		E-Mail						
Property Location										
County: CAPE MAY	Municipality:	STONE HARBOR	Block:	Lot:						
Street Address:										
Construction Permit Application	Number									

Date on which Developer first sought construction of demolition permit (section 37 of P.L. 2008 c.46)

Non Exempt Status

Х

Full Fee of 1%

IF AN EXEMPTION OR REDUCED PAYMENT AMOUNT IS CLAIMED.

THE OWNER SHOULD ATTACH SUBSTANTIATION FOR THAT CLAIM.

I, the undersigned, understand that this declaration and its contents may be disclosed or provided to the State of New Jersey and that any false statement contained herein may be punished by fine, imprisonment, or both. I further declare that I have examined this declaration and, to the best of my knowledge and belief, it is true, correct and complete.

Signature of Owner:										
Name:										
Title:		Date:								
Section B (To be completed by Assessor):										
	Est	Estimated			Final					
Assessed Value	\$		E1		\$		F1			
Director's Ratio		%	E2			%	F2			
Equalized Assessed Value	\$		E3		\$		F3			
Existing Equalized Assessed Value	\$		E4		\$		F4			
Amount on Which Fee is Calculated	\$		E5 (E3-E4)		\$		F5 (F3-F4)			
Residential Development Fee	\$		E6 (E5x1%)		\$		F6 (F5x1%)			
Signature of Assessor:										
Name:		Exempt:		Attach Documentation						
Date:										
Section C (To be completed by Municipality)):									
Payment Amount		Amount should equal F6								
Payment Received by (name)										
Signature										
Name										
Title		Date								