

**STATE OF NEW JERSEY  
REQUEST FOR REAL PROPERTY REVIEW**

Date of Request: \_\_\_\_\_ Department: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Title: \_\_\_\_\_ Telephone #: \_\_\_\_\_

Address: \_\_\_\_\_

**Request for:**      Acquisition      Disposal      Lease      Easement  
                          Transfer      Demolition      Other (Explain below)

**Reason for Request:** \_\_\_\_\_

Description of Property/Facility: \_\_\_\_\_

Property Address: \_\_\_\_\_

Location (Attach Map): County \_\_\_\_\_ Municipality \_\_\_\_\_ Block: \_\_\_\_\_ Lot: \_\_\_\_\_ Total Size: \_\_\_\_\_

Building      Building w/Land      Vacant Land      Farmland

Open Space      Other (Explain) \_\_\_\_\_

LBAM ID(s): Land # \_\_\_\_\_ Building # \_\_\_\_\_

Current Condition & Use of Property: \_\_\_\_\_

Any Bonds or Federal Funds associated with the Property?      No      Yes, **Explain** \_\_\_\_\_

Is the Property Lien Free?      Yes      No

Has the property been acquired by the State in the past 10 years?      Yes      No

Underground Storage Tank(s) located on the property?      Yes Qty: \_\_\_\_\_      No

Any other known Environmental Issues?      No      Yes, **Explain:** \_\_\_\_\_

Any present recreation or conservation/agricultural restrictions?      No      Yes      Restricted Acreage: \_\_\_\_\_ +/-

**If yes, explain:** \_\_\_\_\_

Is the property suitable for farming?      No      Yes      Acreage: \_\_\_\_\_ +/-

Is the property request for use to provide benefit to public health, safety or welfare?      Yes      No

REQUESTING AGENCY

OFFICE OF  
PLANNING ADVOCACY

Provide comments on how this action complies with the State Development & Redevelopment Plan: \_\_\_\_\_

What planning area of the State Plan is impacted by this request? \_\_\_\_\_

Is the property in a designated center?       Yes       No

REVIEWING AGENCIES

**Office of Design and Construction Review:**

Any construction project(s) ongoing or planned for this site?       Yes       No      **If yes, explain and provide Project No. and description of the project:** \_\_\_\_\_

Office of Design Construction Approval: \_\_\_\_\_ Date: \_\_\_\_\_

**Land Review Officer Review:**

This request is: Approved: \_\_\_\_\_ Disapproved: \_\_\_\_\_ Signature: \_\_\_\_\_

Comments: \_\_\_\_\_

**Property Unit Review:**

Alternate sites available in lieu of acquisition:       Yes       No       N/A

Applicable circular letter: \_\_\_\_\_ Approval required: \_\_\_\_\_

AUTHORIZING AGENCY

Division of Budget & Accounting: \_\_\_\_\_ Date: \_\_\_\_\_

*(Name)*

This request is: Approved: \_\_\_\_\_ Disapproved (*Explain Below*): \_\_\_\_\_

Reason for disapproval: \_\_\_\_\_

Division of Property Management & Construction: \_\_\_\_\_ Date: \_\_\_\_\_

*(Name)*

Based on the information provided, this action complies with the current criteria of the State Development and Redevelopment Plan.