

**The Board of County Commissioners
of the County of Monmouth**

CONSTRUCTION BOARD OF APPEALS



**Application to Appeal Professional Service Bills
Under the Provisions of the
Municipal Land Use Law N.J.S.A. 40:55D-1 et seq.**

1. Name of Applicant/Agent _____
 - a.) Home Address _____
 - b.) Business Address _____
2. Subject Property Project Name _____
 - a.) Block(s) _____ Lot(s) _____
 - b.) Street Address _____
 - c.) Municipality _____
 - d.) Nature of Appeal _____

 - e.) Amount of Escrow Previously Posted \$ _____
 - f.) Permit Number (If Applicable) _____
3. Furnish the Following Data with this Appeal Application Form:
 - a.) Copy of written notification to Municipality (40:55D-53.2a) and response to same.
 - b.) Copy of a certified Resolution or Ordinance to establish fee schedule.
 - c.) Copy of the Developer's Agreement and Board Resolution.
 - d.) Copy of professional service bills in question.
 - e.) A legal brief stating the facts of law that will be used, if any.
 - f.) A report detailing the specific charges being contested and why.
 - g.) A copy of site plans and details for the subject property.
 - h.) A chronological description of the work.

4. a.) Proof of Service of Notice on the professional and municipality by certified mail, return receipt requested.
b.) Upon Service of Notice to Appeal Professional Service Bills on the professional firm or municipal employee, the party so served shall prepare a report and file same with the Board Secretary within thirty (30) working days of receipt of the notice.
5. Furnish ten (10) copies of all documents.
6. The Applicant/Agent shall simultaneously send a complete copy of the Appeal to the municipality, approving authority, and any professional whose charge is the subject of the appeal.

Each Professional Service being appealed shall be on a separate application.

The required application fee is \$100.00. Check is to be made payable to **Monmouth County Construction Board of Appeals**. Application fees are non-refundable and cash is not accepted.

I _____, certify that the above information is true and correct and all parties have been properly served.

Signature

Date