



TOWNSHIP OF PLAINSBORO

Department of Planning and Zoning

641 Plainsboro Road

Plainsboro, NJ 08536

609-799-0909 ext. 1502

Form No. 7

AFFIDAVIT OF OWNERSHIP

_____, attest that I/we reside at _____
(Property Owner/s)
in the _____ of _____ in the County of _____, and State
of _____ that _____ is/are the owners in fee of all that certain lot,
(Property Owner/s)
piece or parcel of land situated, lying and being in the Township of Plainsboro, New Jersey, and
known and designated as Block(s) _____, Lot(s) _____.

(Signature of Property Owner/s)

Notary Seal

Sworn and subscribed before me this _____ day of _____, 20____.

(Signature of Notary)

AUTHORIZATION

(If anyone other than above owner is making this application, the following authorization must be executed).

_____ is hereby authorized to
make the within application.

Dated: _____, 20____. _____
(Owners/s to sign here)