

*New Jersey Department of Environmental Protection*

*Application for Sale*

## **BLUE ACRES PROGRAM**

*A program to acquire land in the floodways of the Delaware River, the Passaic River, and the Raritan River, and their respective tributaries, and other areas of New Jersey that are prone to flooding, and to dedicate those lands that are purchased for recreation and conservation purposes.*

*Thank you for your interest in selling your property through the Blue Acres Program.*



**For more information contact:**

**NJDEP Green Acres Program**

**Mail Code 501-01**

**P.O. Box 420**

**Trenton, NJ 08625-0420**

**Tel: (609) 984-0500; Fax: (609) 984-0608**

**Web: [www.nj.gov/dep/greenacres](http://www.nj.gov/dep/greenacres)**

# Application for Blue Acres Acquisition

Return to: \_\_\_\_\_

NJDEP Green Acres Program  
Mail Code 501 -01, P.O. Box 420  
Trenton, NJ 08625-0420  
Contact: (609) 984-0500 Fax: (609) 984-0608  
Web: [www.nj.gov/dep/greenacres](http://www.nj.gov/dep/greenacres)

For G.A. Use Only

Date Received: \_\_\_\_\_  
Offer Number: \_\_\_\_\_  
Approved: \_\_\_\_\_  
Denied: \_\_\_\_\_

## Owner Information

Property Owner's Name: \_\_\_\_\_ Daytime Telephone: \_\_\_\_\_  
Full name

Co-Owner's Name: \_\_\_\_\_ Daytime Telephone: \_\_\_\_\_  
Full name

Property Owner's Mailing Address: \_\_\_\_\_

City, State & Zip Code: \_\_\_\_\_

If applicable, check if the property is owned by a(n): Estate \_\_\_\_\_ Partnership \_\_\_\_\_ Corporation \_\_\_\_\_

## Property Information

Municipality: \_\_\_\_\_ County: \_\_\_\_\_

Please provide the following information, which is available from your most recent tax bill(s):

Block #	Lot #	Assessed Value	Farmland Assessed?	Annual Property Taxes	Acres per Lot
_____	_____	\$ _____	Yes / No	\$ _____	_____
_____	_____	\$ _____	Yes / No	\$ _____	_____
_____	_____	\$ _____	Yes / No	\$ _____	_____

(Use back of application if more space needed.)

Total Acres: \_\_\_\_\_

Property Address or Nearest Street: \_\_\_\_\_

Municipal Zoning District: \_\_\_\_\_  
(available from municipal zoning officer)

Date you acquired title to the property: \_\_\_\_\_ Date of last flood event: \_\_\_\_\_

Are there any structures located on the property? (Use back of application if more space needed.) \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, please describe & provide photos of all damaged structures \_\_\_\_\_

Current use of property: \_\_\_\_\_

Have any commercial activities ever taken place on this property? \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, please describe: \_\_\_\_\_

Are there any leases, rental agreements, easements or deed restrictions affecting the property? \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, please describe: \_\_\_\_\_

Are there any mortgages or liens on the property? \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, please describe: \_\_\_\_\_

Have you ever applied here or elsewhere to sell this property for preservation? \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, please describe: \_\_\_\_\_

What is the name of the closest water body? \_\_\_\_\_

Do you have a completed elevation certificate? \_\_\_\_\_ Yes \_\_\_\_\_ No

Is the property insured with a flood insurance policy under the National Flood Insurance Program? \_\_\_\_\_ Yes \_\_\_\_\_ No

Have you received a flood claim payment from National Flood Insurance Program (NFIP)? \_\_\_\_\_ Yes \_\_\_\_\_ No

Have you pursued, or are you pursuing, any subdivision or development approvals on the property? \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, please describe: \_\_\_\_\_

Dates of Prel. & Final Approvals: \_\_\_\_\_ (Provide documentation of approvals)

Is the property currently listed for sale with a realtor? \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, please provide name and phone #: \_\_\_\_\_

What is your asking price for this property (required)? \_\_\_\_\_

\*NOTE: While the asking price is a key element in the evaluation of this property, it is non-binding, and is not a commitment on the part of the State of New Jersey to pay this amount should this property be selected for acquisition.

Please tell us about your property, including any unique or special environmental features, known historical associations, and any bodies of water on the property or bordering the property. (Use back of application if more space needed.)

### Representative Information

Do you authorize a person to act as your representative in all matters pertaining to this application? \_\_\_\_\_ Yes \_\_\_\_\_ No

What is this person's relationship to you (i.e., family member, realtor, attorney)? \_\_\_\_\_

Name of Representative: \_\_\_\_\_

Representative's Street Address: \_\_\_\_\_

City, State, Zip Code: \_\_\_\_\_ Telephone: \_\_\_\_\_

Signature of Representative: \_\_\_\_\_

Note: Any Agreement for sale / purchase shall be signed by the Owner.

### Attachments

Copies of the following documents should be provided if available:

Tax Map: \_\_\_\_\_ Yes \_\_\_\_\_ No Title Insurance Policy: \_\_\_\_\_ Yes \_\_\_\_\_ No

Deed of Property: \_\_\_\_\_ Yes \_\_\_\_\_ No Survey: \_\_\_\_\_ Yes \_\_\_\_\_ No

Photos of Damaged Structures: \_\_\_\_\_ Yes \_\_\_\_\_ No Elevation Certificate: \_\_\_\_\_ Yes \_\_\_\_\_ No

### Owner Certification

I hereby certify that the information included in this application is true, that I am the legal owner of the property described above, that I have marketable title to the property and that I have the legal right to sell the property. I hereby authorize the staff of the Green Acres Program to conduct such site inspections on the property as are necessary to this application. I understand that the State will not use its eminent domain authority to acquire the property for open-space purposes if I choose not to participate, or if negotiations fail.

Note: All persons having an ownership interest must sign as owners (Use back of application if more space needed). Pursuant to P. L. 2005, C.51; certain political contributions exceeding \$300 may preclude the State from purchasing the landowner's property. For more information, please consult [www.state.nj.us/treasury/purchase/executor134.htm](http://www.state.nj.us/treasury/purchase/executor134.htm) or contact us.

\_\_\_\_\_  
Signature of Owner (Applicant)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Owner (Co-Applicant)

\_\_\_\_\_  
Date