

**NEW JERSEY DEPARTMENT OF ENVIRONMENTAL PROTECTION
GREEN ACRES PROGRAM – TAX EXEMPTION PROGRAM**

APPLICATION FOR REAL PROPERTY TAX EXEMPTION

N.J.S.A. 54:4-3.63 et seq.

NOTE: All applicant organizations must be exempt from Federal Income Tax under Section 501(c)(3) of the Internal Revenue Code of 1954 prior to the submission of this application.

The property must meet all eligibility requirements specified in the Tax Exemption Program Rules (N.J.A.C. 7:35).

Please submit two **Initial Applications (Form GAR-031 1/2014)** with two **Initial Statements *per Block and Lot*** to the Tax Assessor of the municipality in which the property is located.

Also, please submit one **Initial Application (Form GAR-031 1/2014)** and one **Initial Statement *per Block & Lot*** to the following address:

**NJ Department of Environmental Protection
Green Acres – Tax Exemption Program
Mail Code 501-01
P.O. Box 420
Trenton, NJ 08625-0420**

ALL DOCUMENTS MUST HAVE ORIGINAL SIGNATURES.

Click here to obtain an [INITIAL STATEMENT FORM](#).

PART A - OWNER INFORMATION

1. Name of Organization: _____

2. Official Address: _____

3. Organizational Representative to receive correspondence regarding this application:

Name: _____ Title: _____

Street Address: _____ City: _____ State: _____ Zip _____
(if different from organization's address above)

Business Phone: () _____ E-mail Address: _____

PART B - PROPERTY INFORMATION (Attach additional sheets if necessary.)

1. Was the property acquired with Green Acres funding assistance? YES NO
Green Acres Project #: _____

2a. Is the property a new preserve? YES NO Preserve Name: _____

2b. Is the property part of existing preserve? YES NO Preserve Name: _____

3. Location and Description of the Property.

(If the property is in more than one municipality, submit a separate application for each municipality.)

Street Address:
(include parking advice) _____

Municipality: _____ **County:** _____

BLOCK	LOT	CURRENT ASSESSMENT	CURRENT TAXES (annual)	ACRES	ZONING	BUILDINGS OR STRUCTURES (describe)*

*Are structures, if any, on the property used exclusively for or in support of outdoor recreation and conservation? YES NO NO STRUCTURES

*Explain uses of structures: _____

- (a) Flora: _____
- (b) Fauna: _____
- (c) Adjacent Land Use: _____
- (d) Facilities on the Property (trail, kiosk, boat dock, bathing area, parking lot, etc.): _____

4. **Property Inspection:** _____ inspected the property on _____ and
(Name of representative of nonprofit organization) (date)

verifies that the property is free and clear of anything that would preclude or discourage public access. More specifically:

- (a) Does property have locked gates? _____ YES _____ NO
- (b) Does property have "NO TRESPASSING," "PRIVATE PROPERTY,"
or "KEEP OUT" signs (or signs that contain these words)? _____ YES _____ NO
- (c) Does property have junk piles, debris, litter, etc.? _____ YES _____ NO
- (d) Are there any encroachments onto the property? _____ YES _____ NO

If "YES" for any items above, what steps are being taken to resolve? (attach additional sheet if needed) _____

5. **To substantiate the organization's request for tax exemption, the following documents must be submitted:**

- (a) A statement describing the **public use** that will be permitted on the property. This use statement must be a detailed account of all recreation and/or conservation facilities that are available. Explain in detail how the public use will differ from the existing private use of the property;
- (b) A detailed statement describing the **means of access** to the property (street location, parking, etc.) and municipal, street, and detailed site maps showing the location, accessibility, and features of the property;
- (c) A detailed statement describing any **fees, charges, memberships, registrations or schedules** regarding the public use of the property. Explain how the public fees or schedule differ from the existing private ones;
- (d) A detailed statement describing any **restrictions** on the public use of the property (camping, boating, hunting, fishing, day use only, no fires, etc.) and the rationale for the restriction(s);
- (e) A detailed plan for the **maintenance, policing and preservation** of the property; and

6. List any **current leases, business activities, other uses**, etc., which are part of the operation of the property:

PART C - MUNICIPAL INFORMATION

1. Name, Address and Phone Number of the **Municipal Tax Assessor**

Name: _____ Phone: () _____
 Street Address: _____ City: _____ State: _____ Zip: _____

2. Name, Address, and Phone Number of the **Official Advertising Newspaper of the Municipality.**

(This information should be obtained from the municipal clerk's office.)

Name: _____ Phone: () _____
 Street Address: _____ City: _____ State: _____ Zip: _____

