



Township of Montague

"The Top of New Jersey"

277 Clove Road, Montague, NJ 07827
Phone 973-293-7300
Fax 973-293-7467

Dear Applicant:

As Land Use Administrator, I will be your contact person as you prepare to submit your application. I do not have the authority to advise you as to what type of application you need. That decision is one to be made between yourself, your engineer and/or your attorney. I will supply you with the paperwork you request. You will note that each different application has a corresponding application fee and escrow fee.

With each particular application, there is also a corresponding "Checklist". When you submit your application, all of the items on the Checklist must be submitted, or a "waiver" must be requested.

When you request a waiver, you are in essence asking the Board to not require you to provide that particular item. You may request a waiver from any of the provisions; if a waiver is requested, however, you must state in narrative form the reason why you feel entitled to such a waiver.

If you opt to submit an application and have requested waivers, and if I as Land Use Administrator after reviewing your application find that all items on the Checklist have either been submitted or waivers have appropriately been requested, then your application will be scheduled for a "Completeness Hearing." Which means that you will be on the agenda for a Land Use Board meeting where the Board will determine whether or not to grant you the requested waivers. If the board approves the waivers, the application will be heard that evening following the Completeness Hearing.

If your application is found by me to be complete without waiver requests, you will be scheduled for a regular hearing.

Also, please note that your complete submission (maps, application, etc.) must be delivered to my office at least 21 days prior to the desired meeting date.

In such cases where the application needs to be "noticed" to the public, it will be necessary for you to obtain a certified list from the tax assessor. The tax assessor will also verify your correct lot and block numbers. A fee of \$10.00 is also required for said document.

Proof that taxes are paid to date will also be required of ALL applications and can be obtained

from the Tax Collector. There is also a fee of \$2.00 for that document.

During the course of your application, in the event that you have any questions regarding your application I will try to assist you to the best of my ability and within my authority. I thank you in advance for understanding that as secretary to the Land Use Board, I am not qualified to answer legal questions and in such cases, you may have to consult your attorney.

I look forward to working with you and wish you the best of luck.

Very truly yours,

Sharon M. Yarosz
Land Use Administrator

TOWNSHIP OF MONTAGUE
APPLICATION FEE SCHEDULE FOR LAND USE BOARD

MINOR SUBDIVISION	\$100 + \$100 for each creating / resulting lot
MINOR SUBDIVISION involving only boundary line change.....	\$100
PRELIMINARY MAJOR SUBDIVISION	\$175 + Add'l \$50 for EACH newly created/resulting lot
FINAL MAJOR SUBDIVISION	\$125 + Add'l \$25 for EACH newly created/resulting lot
MINOR SITE PLAN OR SITE PLAN WAIVER	\$100
PRELIMINARY SITE PLAN & FINAL SITE PLAN.....	\$300 + \$25 PER ACRE
VARIANCE OR APPEAL	\$200 – Residential
.....	\$300 – Commercial
.....	\$400 – “D” Variance

TELECOMMUNICATION TOWERS:

New Tower Construction.....	\$3,000
No New Tower Construction (Co-location).....	\$1,000

ESCROW FEES

MINOR SUBDIVISION.....	\$500
PRELIMINARY MAJOR SUBDIVISION, PRELIMINARY SITE PLAN.....	\$1,600
FINAL MAJOR SUBDIVISION, FINAL SITE PLAN.....	\$1,000
VARIANCE.....	\$500
TELECOMMUNICATION TOWERS:	
New Tower Construction.....	\$5,000
No New Tower Construction (co-location).....	\$2,000

MISCELLANEOUS FEES

STATUS OF TAXES (ALL APPLICATIONS).....	\$2
CERTIFIED LIST OF ADJACENT PROPERTY OWNERS.....	\$10
SPECIAL MEETING FEE.....	\$300 PER APPLICANT + COST OF ANY PROFESSIONALS
INFORMAL REVIEW.....	\$100 1 HOUR LIMIT*
EXTENSION OF TIME APPROVAL.....	\$50

NOTE: TWO SEPARATE CHECKS MUST BE SUBMITTED
ONE FOR FEES AND ONE FOR ESCROW

*If applicant does proceed forward with an application, this fee should be applied to the formal application fee.

**MONTAGUE TOWNSHIP
SUSSEX COUNTY, NEW JERSEY**

APPLICATION CHECKLIST

Applicant's Name & Address: _____
 Application No. _____ Date Received: _____
 Tax Block(s): _____ Tax Lot(s): _____
 Adjacent Roads: _____
 Present Zoning: _____ Proposed Use: _____

ALL DOCUMENTS TO BE SUBMITTED TO BOARD SECRETARY 21 DAYS PRIOR TO MEETING

Complete	Incomplete	Waiver	N/A	Administrative	Minor Subdivision	Preliminary Site Plan	Preliminary Major Subdivision	Final Site Plan	Final Major Subdivision	Variance C & D	Appeal or Interpretation
				1. Application Form (Original + 14 Copies)	X	X	X	X	X	X	X
				2. Fees & Escrow Deposits	X	X	X	X	X	X	X
				3. Certification of Paid Taxes, Liens, Assessments	X	X	X	X	X	X	X
				4. Proposed Plan (Original Plus 14 Copies)	X	X	X	X	X	X	X
				5. Affidavit of Ownership / Authorization Form	X	X	X	X	X	X	X
				6. Site Inspection Authorization	X	X	X	X	X	X	X
				7. Compliance with Legal Notice Requirements							
				a. Proof of Publication		X	X	X	X	X	X
				b. Affidavit of Service		X	X	X	X	X	X
				8. Corporation or Partnership Form		X	X	X	X	X	X
				9. Listing of All Variances, Design Standards and Checklist Waivers	X	X	X	X	X	X	X
				10. Copies of all prior resolutions pertaining to this property	X	X	X	X	X	X	X
				11. A Recent Photograph of the Property	X	X	X	X	X	X	X
				12. Copy of Sussex County Planning Board Application	X	X	X	X	X	X	X
				13. Copy of Soil Erosion/Sediment Control Application	X	X	X	X	X	X	X

Complete	Incomplete	Waiver	N/A	Administrative	Minor Subdivision	Preliminary Site Plan	Preliminary Major Subdivision	Final Site Plan	Final Major Subdivision	Variance C & D	Appeal or Interpretation
				14. Copy of NJDOT/NJDEP Applications	X	X	X	X	X	X	X
				15. Copy of Sussex County Health Department Application	X	X	X	X	X	X	X
PLANS/REPORTS – SPECIFICATIONS											
				16. Plan Clearly & Legibly Drawn or Reproduced at a Scale not Smaller than 1 inch Equals 50 feet	X	X	X	X	X	X	X
				17. Sheet Size 24" x 36"	X	X	X	X	X	X	X
				18. Name, Address, License Number of Plan Preparer Signature, Original Raised Seal	X	X	X	X	X	X	X
				19. Title Block	X	X	X	X	X	X	X
				20. Record Owner(s) Name and Address	X	X	X	X	X	X	X
				21. Applicant's Name, Address, Phone number & Fax number	X	X	X	X	X	X	X
				22. Name of Project	X	X	X	X	X	X	X
				23. Date of Map Preparation & Each Subsequent Revision	X	X	X	X	X	X	X
				24. Zoning District of Parcel & Surrounding Lands	X	X	X	X	X	X	X
				25. Zoning Chart Listing Existing/Proposed Requirements For Area, Setbacks, Lot Coverage, Height, Density, Floor Area Ratio, Parking	X	X	X	X	X	X	X
				26. Proposed Developer's Agreement		X	X	X	X		
				27. Existing Structures within 200 Feet (200') and Distance to Property Line	X	X	X	X	X	X	X
				28. Obtain Each Block & Lot Numbered in Conformity with Municipal Tax Map as Determined by the Municipal Tax Assessor & Obtain Street Address from the 911 Coordinators	X	X	X	X	X	X	X
				29. Scale of Map, Both Written & Graphic	X	X	X	X	X	X	X

Complete	Incomplete	Waiver	N/A	Administrative	Minor Subdivision	Preliminary Site Plan	Preliminary Major Subdivison	Final Site Plan	Final Major Subdivision	Variance C & D	Appeal or Interpretation
				30. North Arrow Giving Reference Meridian	X	X	X	X	X	X	X
				31. Properties within 200 Feet, Lot & Block Numbers & Owner Outline of 200 Foot (200') Perimeter	X	X	X	X	X	X	X
				32. Tax Map Sheet Number	X	X	X	X	X	X	X
				33. Key Map Showing Location of Tract to be Considered In Relation to Surrounding Area Within 200 feet. Scale Not Less than 1 inch Equals 400 Feet and North Arrow	X	X	X	X	X	X	X
				34. Area of Entire Tract	X	X	X	X	X	X	X
				35. Metes and Bounds of Proposed Lot(s)	X	X	X	X	X	X	X
				36. Area & Frontage of Proposed Lot(s)	X	X	X	X	X	X	X
				37. Area/Frontage of Remaining Tract	X	X	X	X	X	X	X
				38. Property Lines to the Nearest Hundredth	X	X	X	X	X	X	X
				39. Bearings to the Nearest Second	X	X	X	X	X	X	X
				40. Lot Acreage to the Nearest Tenth	X	X	X	X	X	X	X
				41. Building Envelopes	X	X	X	X	X	X	X
				42. Location of Existing Railroads, Bridges, Culverts, Drainage Pipe, Water and Sewer, Utility Poles	X	X	X	X	X	X	X
				43. Natural Features Including Existing Vegetation, Wet Areas, Watercourse, Flood Plain Limit, Rock Outcropping	X	X	X	X	X		
				44. Open Space, Buffer Zone, Recreation Areas, Municipal & Public Areas & Lands to be Conveyed to the Township if Applicable		X	X	X	X		

Complete	Incomplete	Waiver	N/A	Administrative	Minor Subdivision	Preliminary Site Plan	Preliminary Major Subdivison	Final Site Plan	Final Major Subdivision	Variance C & D	Appeal or Interpretation
				45. Plan & Profiles of Road Locations, Type, Size, Width of Right-of-Way, Paving Materials, Edge of Pavement, Curbs, Sidewalks, Catch Basins, Drainage Structures, All Utilities, Rights-of-Way Easements, Existing Buildings or Other Structures, Profile Shall be at a Scale of 1 Inch Equals 5 Feet Vertical ; 1 Inch Equals 50 Feet Horizontal.		X	X	X	X		
				46. Road Cross Sections Every Fifty Feet (50') Along Centerline at a Scale of 1 Inch Equals 5 Feet Horizontal and Vertical		X	X	X			
				47. Existing & Proposed Contours at Five Foot (5') Intervals for Slopes Fifteen Percent (15%) or Greater, Two Foot (2') Intervals for Lesser Slopes		X	X	X			
				48. Earthwork Summary		X	X	X			
				49. Cut & Fill Limits		X	X	X			
				50. Location of Proposed Drainage Structures, Curbs, Swals, Berms, Guide Rails, Edge of Pavement, Sidewalks		X	X	X	X		
				51. Construction Details for Drainage Structures, Curb, Guide Rail, Pavement Design, Sidewalks		X	X	X	X		
				52. Existing/Proposed Driveway Locations with Sight Distance Profiles.	X	X	X	X	X		
				53. Road Locations, Names, Width of Right-of-Way	X	X	X	X	X	X	X
				54. Sight Triangle, Drainage, Utility, Driveway and Other Easements	X	X	X	X	X	X	
				55. Provisions for Certification and Approvals	X	X	X	X	X	X	
				56. Letter Itemizing All Elements Covered Under Performance Bond				X	X		

Complete	Incomplete	Waiver	N/A	Administrative	Minor Subdivision	Preliminary Site Plan	Preliminary Major Subdivison	Final Site Plan	Final Major Subdivision	Variance C & D	Appeal or Interpretation
				57. Letter of Approval & Certification from Township Engineer				X	X		
				58. Letter Certifying Conformance to Preliminary Plat by Applicant's Engineer				X	X		
				59. Final Map Statement Included on Plat: "I certify that (NAME OF STREET OR STREETS) are approved roads by the Land Use Board of the Township of Montague. Approval of this map shall not be construed as acceptance of said roadways indicated herein, nor shall such approval obligate the Township of Montague to maintain or exercise jurisdiction on said road or street until such time said road may be accepted by the Township of Montague." Signature of _____ Township Clerk					X		
				60. Soil Erosion Plan and Details		X	X				
				61. Fire Protection Details Include Number of Proposed Units, Available Water Supply, Water Main Size, Flow, Hydrant Location		X	X	X			
				62. Cluster Development Option Data			X				
				63. Environmental Impact Statement		X	X				
				64. Landscape Plan with Types, Quantity Size & Location of Plantings. Scientific & Common Names.		X	X	X			
				65. Lighting Plan, Including Fixture and Footing Details, Wattage, Height, Isolux Patterns		X	X	X			
				66. Drainage Plan Including Runoff Calculations for Fifty (50) Year Storm Frequency and a Map Showing Drainage Area		X	X				

Complete	Incomplete	Waiver	N/A	Administrative	Minor Subdivision	Preliminary Site Plan	Preliminary Major Subdivison	Final Site Plan	Final Major Subdivision	Variance C & D	Appeal or Interpretation
				67. Storm Drainage Facilities Improvements Designed for One Hundred (100) Year Flood Capacity and compliance to NJ RSIS Drainage and Road Standards, if applicable.		X	X				
				68. Copies of Stream Encroachment Permit Applications, If Applicable		X	X	X	X		
				69. NJDEP Letter of Interpretation Regarding the Presence/Absence of Wetlands on Property and Within 150'. If Wetlands are Present, Line Verified by NJDEP and Transition Area Established. NJDEP Reference Number on Plan. For Minors Only a Delineation is Needed and an Absence/Presence Letter to Determine Buffer Width.	X	X	X	X	X	X	X
				70. Written Confirmation from Tax Assessor that Proposed Lot Numbers are Acceptable	X		X		X		
				71. Facility Impact Report, Including:							
				a. Sewer and Water Report		X	X	X	X		
				b. Sewer and Water Map		X	X	X	X		
				c. Circulation/Traffic Report		X	X	X	X		
				d. Circulation/Traffic Map		X	X	X	X		
				72. Four (4) Soil Logs and Four (4) Permeability Tests per Proposed Lot	X	X	X	X		X	
				73. Copies of Protective Covenants, Deed Restrictions or Homeowner Association Documents		X	X	X	X		
				74. Building Floor Plan, Elevation Views and First Floor Elevation with Overall Building Height		X		X		X	X
				75. Provisions for Solid Waste, Dumpster Enclosure		X		X			
				76. Compliance with ADA Requirements		X		X		X	X

Complete	Incomplete	Waiver	N/A	Administrative	Minor Subdivision	Preliminary Site Plan	Preliminary Major Subdivison	Final Site Plan	Final Major Subdivision	Variance C & D	Appeal or Interpretation
				77. Graphic/Written Description of Area Surrounding the Site so the Prevailing Zoning and Actual Uses in the Area are Clear						X	X
				78. A Description of Any Alternatives that were Considered.						X	X
				79. A Statement or Legal Brief which Clarifies Why the Variance Should be Granted						X	X
				80. Copy of all Relevant Documents from the Zoning Officer							X
				81. The Following Additional Information is Required <u>Only</u> for Soil Removal Conditional Use Application:							
				a. Aerial Photo of Entire Site and Surrounding Area		X		X		X	
				b. Total Cubic Yards		X		X		X	
				c. Length of Operation Time		X		X		X	
				d. Daily Hours of Operation		X		X		X	
				e. Soil Fertility Statement for all Soil Series on Site		X		X		X	
				f. Reclamation & Landscape Plan		X		X		X	
				g. Surface Water Drainage Plan		X		X		X	
				h. Sections of Soil Removal		X		X		X	
				i. Dimensions of Evacuation Area		X		X		X	
				j. Natural Features including Existing Vegetation & Trees of (6") DBH		X		X		X	
				k. Depth of Water Table		X		X		X	
				l. PE Certification of Water Table Depth		X		X		X	
				m. Identification Procedure		X		X		X	

Complete	Incomplete	Waiver	N/A	Administrative	Minor Subdivision	Preliminary Site Plan	Preliminary Major Subdivison	Final Site Plan	Final Major Subdivision	Variance C & D	Appeal or Interpretation
				n. Date of Test		X		X		X	

MONTAGUE TOWNSHIP LAND USE BOARD

UNIFIED LAND DEVELOPMENT APPLICATION

Application No. _____

***Type of Application:**

- () Minor Subdivision
- () Preliminary Major Subdivision
- () Final Major Subdivision
- () Preliminary Site Plan
- () Final Site Plan
- () Variance and/or Appeal
- () Other (Informal, Planning Variance, Nonconformance Certificate, Extension of Approval, etc.)

***APPLICANTS MUST IDENTIFY WHAT TYPE OF APPLICATION THEY ARE MAKING.**

PLEASE SUBMIT APPLICATION FEE AND REVIEW/INSPECTION ESCROW BY SEPARATE CHECKS, EACH PAYABLE TO THE "TOWNSHIP OF MONTAGUE"

Do not write below this line

Date Submitted: _____ Date of Action: _____

Resolution Adopted: _____

Received by: _____ Fee: \$ _____ Escrow: \$ _____

Expiration of 45 day Period to Determine Completeness: _____

Certified: () Incomplete _____ () Complete _____ By: _____

Expiration of 45/95 Day Period to Render Decision: _____

Do not write above this line

If application is being made by anyone other than the owner of the property, attach written authorization from the property owner to the applicant permitting this application to be submitted.

1. Name of Project: _____
2. Name of Applicant: _____
Interest of Application: _____
Address: _____
Telephone: _____
3. Name of Representative/Attorney: _____
Address: _____
Telephone: _____
4. Name of Property Owner: _____
Mailing Address: _____
Telephone: _____

5. Attorney for Applicant:

Name: _____

Address: _____

_____ Telephone: _____

6. Plans Prepared by:

P.E. Lic. No.: _____ Name: _____

_____ Firm Name: _____

Address: _____

_____ Telephone: _____

L.S. Lic. No.: _____ Name: _____

_____ Firm Name: _____

Address: _____

_____ Telephone: _____

P.P. Lic. No.: _____ Name: _____

_____ Firm Name: _____

Address: _____

_____ Telephone: _____

Land Arch. Lic. No. Name: _____

_____ Firm Name: _____

Address: _____

_____ Telephone: _____

Arch. Lic. No. Name: _____

_____ Firm Name: _____

Address: _____

_____ Telephone: _____

7. Property Description:

Street Location: _____

Block: _____ Lot: _____ Tax Map Sheet: _____

_____ Size: _____

_____ Zone: _____

8. Has this property been the subject of any previous application? _____

If yes:

() Planning Board () Zoning Board () Land Use Board

Application No.: _____ Application: _____

Action: _____ Date: _____

9. Have Property taxes been paid to date?

() Yes *(attach status of taxes certification)*

() No

10. Was the Subdivision and Zoning Ordinance read by the applicant or his agent?

YES or NO *(Please circle one)*

11. Description of Proposal:

a. Subdivision: Number of New Lots (including remainder): _____

Sizes: _____

Development Plans:

a. Sales of lots only (yes/no): _____

b. Construction by applicant: _____

c. Other: _____

If clustered, indicate gross density and net density as well as size or open space:

b. Site Plan: Proposed Use: _____

() New Construction () Addition () Parking () Other

Description: _____

Total Number of Units: _____

Unit Types: _____ Number: _____

Accessory Uses: _____

Open Space – Total Acreage: _____
Active Recreation: _____ Passive Recreation: _____
Conservation: _____ Other: _____

- c. Proposed Improvements: () Onsite () Offsite () On tract () Off tract
() Roads () Drainage () Other: _____

d. Variances:

If any variances are being requested, please identify by Ordinance Section No. and description.

Section: _____ Description: _____
Section: _____ Description: _____
Section: _____ Description: _____

1. Was application made to the building inspector? _____
2. If yes, what was his decision? _____
3. What are the EXCEPTIONAL, conditions of the property preventing the applicant from complying with the Ordinance?

4. How can the Board permit the requisition without causing detrimental effects to the neighborhood and Zoning Plan?

e. Other Types of Applications:

What Type of Application: _____

12. Additional Comments: _____

NOTARIZED CERTIFICATION

I (We) do hereby certify that the facts presented in this application and all attached information thereto are correct and accurate.

Date: _____

(Applicant or agent's signature)

(Applicant's signature)

State of New Jersey

County of _____

Sworn to before me this _____

Day of _____, 20____.

Notary Public

As required, indicated if appropriate applicants have been made to any of the following, and date application was made:

- () Sussex County Planning Board – date filed: _____
- () Sussex County Soil Conservation District – date filed: _____
- () New Jersey Department of Transportation – date filed: _____
- () New Jersey Department of Environmental Protection – date filed: _____
- () Adjoining Municipality: _____
- () Adjoining County: _____
- () Other: _____

No. of copies of this application to be filed: 14 Copies

PERMISSION TO INSPECT

Applicants Name: _____

Block(s): _____ Lot(s): _____ Date: _____

TO WHOM IT MAY CONCERN:

Please be advised that I/we hereby give permission to the Montague Twp. Land Use Board or its agent to inspect the above premises, which is/are the subject of this application before the Board.

Applicant/Owner

AFFIDAVIT OF APPLICANT

STATE OF NEW JERSEY

SS:

COUNTY OF _____

_____, of full age, being duly sworn according to law, on oath deposes and says that all of the above statements and the statements contained in the papers submitted herewith are true.

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

Notary Public

(Applicant sign here)

AFFIDAVIT OF OWNERSHIP

(if different from Applicant)

STATE OF NEW JERSEY

SS:

COUNTY OF _____

_____, of full age, being duly sworn according to law, on oath deposes and says, that the deponent resides at _____ in the _____ of _____ in the County of _____ and State of _____, that _____ is the owner in fee of all that certain lot, piece or parcel of lands situated, lying, and being in the municipality aforesaid, and known and designated as Number _____

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

Notary Public

(Owner sign here)

TOWNSHIP OF MONTAGUE
277 Clove Road, Montague, NJ 07827
973-293-7300 973-293-7467 (fax)

Date Requested: _____

REQUEST FOR 200' CERTIFIED LIST
PURSUANT TO N.J.S.A. 40:55D-12(c)

TO: TAX ASSESSOR:

The undersigned is hereby requesting a certified list of property owners within 200' of
BLOCK(S) _____ LOT(S) _____
for the purposes of:

- ☐ Land Use Board
☐ Other

Name & Address of Owner of Record:

Requesting Party Name & Address:

BY: _____

Name

Address

Telephone Number

\$10.00 FEE MUST ACCOMPANY REQUEST

DATE RECEIVED BY TOWNSHIP _____

NOTICE TO ADJACENT PROPERTY OWNERS

PLEASE TAKE NOTICE that the undersigned has made application to the Land Use Board of the Township of Montague for property known as Block(s) _____, Lot(s) _____ located at _____ for a variance from the terms of (*insert Zoning Ordinance or Statute number*) _____ so as to permit _____

In addition, applicant will request such variances, waivers, permits, approvals or licenses that are deemed necessary or appropriate by the applicant or the Board.

This application is now on the calendar for the Montague Township Land Use Board and a public hearing has been set for _____, at the Township of Montague Municipal Building, 277 Clove Road, Montague, New Jersey 07827, at 7:00 p.m. When the case is called, you may appear either in person or by attorney to present any evidence which you may have regarding the application. The matter will be heard on the above date or any adjourned date designated by the Land Use Board at this public meeting without additional notice. The maps, plans, plats and application for which approval is being sought are on file with the Land Use Board Secretary and are available for inspection at the Municipal Building during normal business hours.

Name of Applicant

Address of Applicant

Docket Number

NEWSPAPER NOTICE

PLEASE TAKE NOTICE that the undersigned has made application to the Land Use Board of the Township of Montague for property known as Block(s) _____, Lot(s) _____ located at _____ for a variance from the terms of (*insert Zoning Ordinance or Statute number*) _____ so as to permit _____

In addition, applicant will request such variances, waivers, permits, approvals or licenses that are deemed necessary or appropriate by the applicant or the Land Use Board.

This application is now on the calendar for the Montague Township Land Use Board and a public hearing has been set for _____, at the Township of Montague Municipal Building, 277 Clove Road, Montague, New Jersey 07827, at 7:00 p.m. When the case is called, you may appear either in person or by attorney to present any evidence which you may have regarding the application. The matter will be heard on the above date or any adjourned date designated by the Land Use Board at this public meeting without additional notice. The maps, plans, plats and application for which approval is being sought are on file with the Land Use Board Secretary and are available for inspection at the Municipal Building during normal business hours.

Name of Applicant

Address of Applicant

Docket Number

The New Jersey Herald
Legal Advertising Information

April 27, 2016

Please be advised of the requirements to publish a legal notice in the New Jersey Herald are as follows:

Legals cannot be taken over the phone. The form that your Township/Borough gives you can be either faxed, emailed or you may come into our office located in Newton New Jersey.

There is a 2 day deadline for legal publishing.

Monday 12 noon for Wednesday

Tuesday 12 noon for Thursday

Wednesday 12 noon for Friday

Thursday 12 noon for Sunday

Friday 10 am for Monday & Tuesday

With your information, we also need the applicants name, mailing address and telephone number so we can mail the affidavit of publication to the applicant. Please make sure everything is legible.

A \$25.00 deposit is required on all legal advertising if paying with a check or cash. Credit cards will be charged the full amount of the legal ad once it set in the system for publication.

Contact Information: Direct Line (973-383-1051)

Fax: (973-383-4828) Email: Legals@njherald.com

New Jersey Herald: 2 Spring Street, Newton, NJ 07860

MONTAGUE TOWNSHIP - STATUS OF TAXES

DATE: _____

TYPE OF PERMIT/LICENSE:

LAND USE BOARD: _____

CONSTRUCTION: _____

FOOD HANDLERS: _____

CAMPGROUND: _____

JUNKYARD: _____

APPLICANT NAME: _____ BLOCK(S) _____ LOT(S) _____

QUARTER

AMOUNT

STATUS

Jan/Feb/Mar _____

April/May/June _____

July/Aug/Sept _____

Oct/Nov/Dec _____

SPECIAL ASSESSMENT

Type	Original Amount
------	-----------------

Amount of Installments Due

Status

_____, _____

_____, _____

I, Frances Multari, Tax Collector for
the Township of Montague, do hereby certify
that the taxes and special assessments are
as stated above.

_____ Date _____

Francis Multari, C.T.C.
Tax Collector

AFFIDAVIT OF SERVICE

Fill in all the blanks of Affidavit and Form of Notice. This page must be notarized and attached to the list of property owners served.

STATE OF NEW JERSEY ss:
COUNTY OF _____

_____, of full age, being duly sworn according to law, deposes and says, that I reside at _____ in the municipality of _____, County of _____ and State of _____, that _____ is the applicant in a proceeding before the Land Use Board, Township of Montague, being an appeal under the Zoning Ordinance, and which has the Calendar Number _____, and relates to premises: Block(s): _____, Lot(s) _____; that on _____, 20____ I gave notice of the hearing on this appeal to all property owners according to the attached list in the manner indicated thereon, said notice being in the form set forth below:

FORM OF NOTICE

Please take notice:

That the undersigned has appealed to the Land Use Board of the Township of Montague for a variance from the terms of Articles and Sections _____ of the Zoning Ordinance so as to permit _____ on the premises; Block(s) _____, Lot(s) _____ which is within 200 feet of property owned by you. This appeal is scheduled for _____, 20____ at 7:00 p.m. in the Township of Montague Municipal Building, Montague, New Jersey, at which time you may appear either in person, or by an attorney, and present objections, if any, which you may have to the granting of this appeal. This notice is sent to you by the applicant, by order of the Montague Township Land Use Board.

Respectfully,

(Applicant's Name)

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

Notary Public

(To be signed here by the person who actually served the notices)

Request for Taxpayer Identification Number and Certification

Give Form to the
requester. Do not
send to the IRS.

► Go to www.irs.gov/FormW9 for instructions and the latest information.

Print or type. See Specific Instructions on page 3.	1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.	
	2 Business name/disregarded entity name, if different from above	
	3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes. <input type="checkbox"/> Individual/sole proprietor or single-member LLC <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ► _____ Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner. <input type="checkbox"/> Other (see instructions) ► _____	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) _____ Exemption from FATCA reporting code (if any) _____ <i>(Applies to accounts maintained outside the U.S.)</i>
	5 Address (number, street, and apt. or suite no.) See instructions.	Requester's name and address (optional)
	6 City, state, and ZIP code	
	7 List account number(s) here (optional)	

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Note: If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number									
				-				-	
or									
Employer identification number									
				-					

Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
3. I am a U.S. citizen or other U.S. person (defined below); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign Here	Signature of U.S. person ►	Date ►
-----------	----------------------------	--------

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-INT (interest earned or paid)

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, later.

By signing the filled-out form, you:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
2. Certify that you are not subject to backup withholding, or
3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income, and
4. Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See *What is FATCA reporting*, later, for further information.

Note: If you are a U.S. person and a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

Definition of a U.S. person. For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien;
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States;
- An estate (other than a foreign estate); or
- A domestic trust (as defined in Regulations section 301.7701-7).

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax under section 1446 on any foreign partners' share of effectively connected taxable income from such business. Further, in certain cases where a Form W-9 has not been received, the rules under section 1446 require a partnership to presume that a partner is a foreign person, and pay the section 1446 withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid section 1446 withholding on your share of partnership income.

In the cases below, the following person must give Form W-9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States.

- In the case of a disregarded entity with a U.S. owner, the U.S. owner of the disregarded entity and not the entity;
- In the case of a grantor trust with a U.S. grantor or other U.S. owner, generally, the U.S. grantor or other U.S. owner of the grantor trust and not the trust; and
- In the case of a U.S. trust (other than a grantor trust), the U.S. trust (other than a grantor trust) and not the beneficiaries of the trust.

Foreign person. If you are a foreign person or the U.S. branch of a foreign bank that has elected to be treated as a U.S. person, do not use Form W-9. Instead, use the appropriate Form W-8 or Form 8233 (see Pub. 515, *Withholding of Tax on Nonresident Aliens and Foreign Entities*).

Nonresident alien who becomes a resident alien. Generally, only a nonresident alien individual may use the terms of a tax treaty to reduce or eliminate U.S. tax on certain types of income. However, most tax treaties contain a provision known as a "saving clause." Exceptions specified in the saving clause may permit an exemption from tax to continue for certain types of income even after the payee has otherwise become a U.S. resident alien for tax purposes.

If you are a U.S. resident alien who is relying on an exception contained in the saving clause of a tax treaty to claim an exemption from U.S. tax on certain types of income, you must attach a statement to Form W-9 that specifies the following five items.

1. The treaty country. Generally, this must be the same treaty under which you claimed exemption from tax as a nonresident alien.
2. The treaty article addressing the income.
3. The article number (or location) in the tax treaty that contains the saving clause and its exceptions.
4. The type and amount of income that qualifies for the exemption from tax.
5. Sufficient facts to justify the exemption from tax under the terms of the treaty article.

Example. Article 20 of the U.S.-China income tax treaty allows an exemption from tax for scholarship income received by a Chinese student temporarily present in the United States. Under U.S. law, this student will become a resident alien for tax purposes if his or her stay in the United States exceeds 5 calendar years. However, paragraph 2 of the first Protocol to the U.S.-China treaty (dated April 30, 1984) allows the provisions of Article 20 to continue to apply even after the Chinese student becomes a resident alien of the United States. A Chinese student who qualifies for this exception (under paragraph 2 of the first protocol) and is relying on this exception to claim an exemption from tax on his or her scholarship or fellowship income would attach to Form W-9 a statement that includes the information described above to support that exemption.

If you are a nonresident alien or a foreign entity, give the requester the appropriate completed Form W-8 or Form 8233.

Backup Withholding

What is backup withholding? Persons making certain payments to you must under certain conditions withhold and pay to the IRS 24% of such payments. This is called "backup withholding." Payments that may be subject to backup withholding include interest, tax-exempt interest, dividends, broker and barter exchange transactions, rents, royalties, nonemployee pay, payments made in settlement of payment card and third party network transactions, and certain payments from fishing boat operators. Real estate transactions are not subject to backup withholding.

You will not be subject to backup withholding on payments you receive if you give the requester your correct TIN, make the proper certifications, and report all your taxable interest and dividends on your tax return.

Payments you receive will be subject to backup withholding if:

1. You do not furnish your TIN to the requester,
2. You do not certify your TIN when required (see the instructions for Part II for details),
3. The IRS tells the requester that you furnished an incorrect TIN,
4. The IRS tells you that you are subject to backup withholding because you did not report all your interest and dividends on your tax return (for reportable interest and dividends only), or
5. You do not certify to the requester that you are not subject to backup withholding under 4 above (for reportable interest and dividend accounts opened after 1983 only).

Certain payees and payments are exempt from backup withholding. See *Exempt payee code*, later, and the separate Instructions for the Requester of Form W-9 for more information.

Also see *Special rules for partnerships*, earlier.

What is FATCA Reporting?

The Foreign Account Tax Compliance Act (FATCA) requires a participating foreign financial institution to report all United States account holders that are specified United States persons. Certain payees are exempt from FATCA reporting. See *Exemption from FATCA reporting code*, later, and the Instructions for the Requester of Form W-9 for more information.

Updating Your Information

You must provide updated information to any person to whom you claimed to be an exempt payee if you are no longer an exempt payee and anticipate receiving reportable payments in the future from this person. For example, you may need to provide updated information if you are a C corporation that elects to be an S corporation, or if you no longer are tax exempt. In addition, you must furnish a new Form W-9 if the name or TIN changes for the account; for example, if the grantor of a grantor trust dies.

Penalties

Failure to furnish TIN. If you fail to furnish your correct TIN to a requester, you are subject to a penalty of \$50 for each such failure unless your failure is due to reasonable cause and not to willful neglect.

Civil penalty for false information with respect to withholding. If you make a false statement with no reasonable basis that results in no backup withholding, you are subject to a \$500 penalty.

Criminal penalty for falsifying information. Willfully falsifying certifications or affirmations may subject you to criminal penalties including fines and/or imprisonment.

Misuse of TINs. If the requester discloses or uses TINs in violation of federal law, the requester may be subject to civil and criminal penalties.

Specific Instructions

Line 1

You must enter one of the following on this line; **do not** leave this line blank. The name should match the name on your tax return.

If this Form W-9 is for a joint account (other than an account maintained by a foreign financial institution (FFI)), list first, and then circle, the name of the person or entity whose number you entered in Part I of Form W-9. If you are providing Form W-9 to an FFI to document a joint account, each holder of the account that is a U.S. person must provide a Form W-9.

a. **Individual.** Generally, enter the name shown on your tax return. If you have changed your last name without informing the Social Security Administration (SSA) of the name change, enter your first name, the last name as shown on your social security card, and your new last name.

Note: ITIN applicant: Enter your individual name as it was entered on your Form W-7 application, line 1a. This should also be the same as the name you entered on the Form 1040/1040A/1040EZ you filed with your application.

b. **Sole proprietor or single-member LLC.** Enter your individual name as shown on your 1040/1040A/1040EZ on line 1. You may enter your business, trade, or "doing business as" (DBA) name on line 2.

c. **Partnership, LLC that is not a single-member LLC, C corporation, or S corporation.** Enter the entity's name as shown on the entity's tax return on line 1 and any business, trade, or DBA name on line 2.

d. **Other entities.** Enter your name as shown on required U.S. federal tax documents on line 1. This name should match the name shown on the charter or other legal document creating the entity. You may enter any business, trade, or DBA name on line 2.

e. **Disregarded entity.** For U.S. federal tax purposes, an entity that is disregarded as an entity separate from its owner is treated as a "disregarded entity." See Regulations section 301.7701-2(c)(2)(iii). Enter the owner's name on line 1. The name of the entity entered on line 1 should never be a disregarded entity. The name on line 1 should be the name shown on the income tax return on which the income should be reported. For example, if a foreign LLC that is treated as a disregarded entity for U.S. federal tax purposes has a single owner that is a U.S. person, the U.S. owner's name is required to be provided on line 1. If the direct owner of the entity is also a disregarded entity, enter the first owner that is not disregarded for federal tax purposes. Enter the disregarded entity's name on line 2, "Business name/disregarded entity name." If the owner of the disregarded entity is a foreign person, the owner must complete an appropriate Form W-8 instead of a Form W-9. This is the case even if the foreign person has a U.S. TIN.

Line 2

If you have a business name, trade name, DBA name, or disregarded entity name, you may enter it on line 2.

Line 3

Check the appropriate box on line 3 for the U.S. federal tax classification of the person whose name is entered on line 1. Check only one box on line 3.

IF the entity/person on line 1 is a(n) . . .	THEN check the box for . . .
• Corporation	Corporation
• Individual • Sole proprietorship, or • Single-member limited liability company (LLC) owned by an individual and disregarded for U.S. federal tax purposes.	Individual/sole proprietor or single-member LLC
• LLC treated as a partnership for U.S. federal tax purposes, • LLC that has filed Form 8832 or 2553 to be taxed as a corporation, or • LLC that is disregarded as an entity separate from its owner but the owner is another LLC that is not disregarded for U.S. federal tax purposes.	Limited liability company and enter the appropriate tax classification. (P= Partnership; C= C corporation; or S= S corporation)
• Partnership	Partnership
• Trust/estate	Trust/estate

Line 4, Exemptions

If you are exempt from backup withholding and/or FATCA reporting, enter in the appropriate space on line 4 any code(s) that may apply to you.

Exempt payee code.

- Generally, individuals (including sole proprietors) are not exempt from backup withholding.
- Except as provided below, corporations are exempt from backup withholding for certain payments, including interest and dividends.
- Corporations are not exempt from backup withholding for payments made in settlement of payment card or third party network transactions.
- Corporations are not exempt from backup withholding with respect to attorneys' fees or gross proceeds paid to attorneys, and corporations that provide medical or health care services are not exempt with respect to payments reportable on Form 1099-MISC.

The following codes identify payees that are exempt from backup withholding. Enter the appropriate code in the space in line 4.

- 1—An organization exempt from tax under section 501(a), any IRA, or a custodial account under section 403(b)(7) if the account satisfies the requirements of section 401(f)(2)
- 2—The United States or any of its agencies or instrumentalities
- 3—A state, the District of Columbia, a U.S. commonwealth or possession, or any of their political subdivisions or instrumentalities
- 4—A foreign government or any of its political subdivisions, agencies, or instrumentalities
- 5—A corporation
- 6—A dealer in securities or commodities required to register in the United States, the District of Columbia, or a U.S. commonwealth or possession
- 7—A futures commission merchant registered with the Commodity Futures Trading Commission
- 8—A real estate investment trust
- 9—An entity registered at all times during the tax year under the Investment Company Act of 1940
- 10—A common trust fund operated by a bank under section 584(a)
- 11—A financial institution
- 12—A middleman known in the investment community as a nominee or custodian
- 13—A trust exempt from tax under section 664 or described in section 4947

The following chart shows types of payments that may be exempt from backup withholding. The chart applies to the exempt payees listed above, 1 through 13.

IF the payment is for . . .	THEN the payment is exempt for . . .
Interest and dividend payments	All exempt payees except for 7
Broker transactions	Exempt payees 1 through 4 and 6 through 11 and all C corporations. S corporations must not enter an exempt payee code because they are exempt only for sales of noncovered securities acquired prior to 2012.
Barter exchange transactions and patronage dividends	Exempt payees 1 through 4
Payments over \$600 required to be reported and direct sales over \$5,000 ¹	Generally, exempt payees 1 through 5 ²
Payments made in settlement of payment card or third party network transactions	Exempt payees 1 through 4

¹ See Form 1099-MISC, Miscellaneous Income, and its instructions.

² However, the following payments made to a corporation and reportable on Form 1099-MISC are not exempt from backup withholding: medical and health care payments, attorneys' fees, gross proceeds paid to an attorney reportable under section 6045(f), and payments for services paid by a federal executive agency.

Exemption from FATCA reporting code. The following codes identify payees that are exempt from reporting under FATCA. These codes apply to persons submitting this form for accounts maintained outside of the United States by certain foreign financial institutions. Therefore, if you are only submitting this form for an account you hold in the United States, you may leave this field blank. Consult with the person requesting this form if you are uncertain if the financial institution is subject to these requirements. A requester may indicate that a code is not required by providing you with a Form W-9 with "Not Applicable" (or any similar indication) written or printed on the line for a FATCA exemption code.

A—An organization exempt from tax under section 501(a) or any individual retirement plan as defined in section 7701(a)(37)

B—The United States or any of its agencies or instrumentalities

C—A state, the District of Columbia, a U.S. commonwealth or possession, or any of their political subdivisions or instrumentalities

D—A corporation the stock of which is regularly traded on one or more established securities markets, as described in Regulations section 1.1472-1(c)(1)(i)

E—A corporation that is a member of the same expanded affiliated group as a corporation described in Regulations section 1.1472-1(c)(1)(i)

F—A dealer in securities, commodities, or derivative financial instruments (including notional principal contracts, futures, forwards, and options) that is registered as such under the laws of the United States or any state

G—A real estate investment trust

H—A regulated investment company as defined in section 851 or an entity registered at all times during the tax year under the Investment Company Act of 1940

I—A common trust fund as defined in section 584(a)

J—A bank as defined in section 581

K—A broker

L—A trust exempt from tax under section 664 or described in section 4947(a)(1)

M—A tax exempt trust under a section 403(b) plan or section 457(g) plan

Note: You may wish to consult with the financial institution requesting this form to determine whether the FATCA code and/or exempt payee code should be completed.

Line 5

Enter your address (number, street, and apartment or suite number). This is where the requester of this Form W-9 will mail your information returns. If this address differs from the one the requester already has on file, write NEW at the top. If a new address is provided, there is still a chance the old address will be used until the payor changes your address in their records.

Line 6

Enter your city, state, and ZIP code.

Part I. Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. If you are a resident alien and you do not have and are not eligible to get an SSN, your TIN is your IRS individual taxpayer identification number (ITIN). Enter it in the social security number box. If you do not have an ITIN, see *How to get a TIN* below.

If you are a sole proprietor and you have an EIN, you may enter either your SSN or EIN.

If you are a single-member LLC that is disregarded as an entity separate from its owner, enter the owner's SSN (or EIN, if the owner has one). Do not enter the disregarded entity's EIN. If the LLC is classified as a corporation or partnership, enter the entity's EIN.

Note: See *What Name and Number To Give the Requester*, later, for further clarification of name and TIN combinations.

How to get a TIN. If you do not have a TIN, apply for one immediately. To apply for an SSN, get Form SS-5, Application for a Social Security Card, from your local SSA office or get this form online at www.SSA.gov. You may also get this form by calling 1-800-772-1213. Use Form W-7, Application for IRS Individual Taxpayer Identification Number, to apply for an ITIN, or Form SS-4, Application for Employer Identification Number, to apply for an EIN. You can apply for an EIN online by accessing the IRS website at www.irs.gov/Businesses and clicking on Employer Identification Number (EIN) under Starting a Business. Go to www.irs.gov/Forms to view, download, or print Form W-7 and/or Form SS-4. Or, you can go to www.irs.gov/OrderForms to place an order and have Form W-7 and/or SS-4 mailed to you within 10 business days.

If you are asked to complete Form W-9 but do not have a TIN, apply for a TIN and write "Applied For" in the space for the TIN, sign and date the form, and give it to the requester. For interest and dividend payments, and certain payments made with respect to readily tradable instruments, generally you will have 60 days to get a TIN and give it to the requester before you are subject to backup withholding on payments. The 60-day rule does not apply to other types of payments. You will be subject to backup withholding on all such payments until you provide your TIN to the requester.

Note: Entering "Applied For" means that you have already applied for a TIN or that you intend to apply for one soon.

Caution: A disregarded U.S. entity that has a foreign owner must use the appropriate Form W-8.

Part II. Certification

To establish to the withholding agent that you are a U.S. person, or resident alien, sign Form W-9. You may be requested to sign by the withholding agent even if item 1, 4, or 5 below indicates otherwise.

For a joint account, only the person whose TIN is shown in Part I should sign (when required). In the case of a disregarded entity, the person identified on line 1 must sign. Exempt payees, see *Exempt payee code*, earlier.

Signature requirements. Complete the certification as indicated in items 1 through 5 below.

1. Interest, dividend, and barter exchange accounts opened before 1984 and broker accounts considered active during 1983.

You must give your correct TIN, but you do not have to sign the certification.

2. Interest, dividend, broker, and barter exchange accounts opened after 1983 and broker accounts considered inactive during 1983. You must sign the certification or backup withholding will apply. If you are subject to backup withholding and you are merely providing your correct TIN to the requester, you must cross out item 2 in the certification before signing the form.

3. Real estate transactions. You must sign the certification. You may cross out item 2 of the certification.

4. Other payments. You must give your correct TIN, but you do not have to sign the certification unless you have been notified that you have previously given an incorrect TIN. "Other payments" include payments made in the course of the requester's trade or business for rents, royalties, goods (other than bills for merchandise), medical and health care services (including payments to corporations), payments to a nonemployee for services, payments made in settlement of payment card and third party network transactions, payments to certain fishing boat crew members and fishermen, and gross proceeds paid to attorneys (including payments to corporations).

5. Mortgage interest paid by you, acquisition or abandonment of secured property, cancellation of debt, qualified tuition program payments (under section 529), ABLE accounts (under section 529A), IRA, Coverdell ESA, Archer MSA or HSA contributions or distributions, and pension distributions. You must give your correct TIN, but you do not have to sign the certification.

What Name and Number To Give the Requester

For this type of account:	Give name and SSN of:
1. Individual	The individual
2. Two or more individuals (joint account) other than an account maintained by an FFI	The actual owner of the account or, if combined funds, the first individual on the account ¹
3. Two or more U.S. persons (joint account maintained by an FFI)	Each holder of the account
4. Custodial account of a minor (Uniform Gift to Minors Act)	The minor ²
5. a. The usual revocable savings trust (grantor is also trustee)	The grantor-trustee ¹
b. So-called trust account that is not a legal or valid trust under state law	The actual owner ¹
6. Sole proprietorship or disregarded entity owned by an individual	The owner ³
7. Grantor trust filing under Optional Form 1099 Filing Method 1 (see Regulations section 1.671-4(b)(2)(i)(A))	The grantor*
For this type of account:	Give name and EIN of:
8. Disregarded entity not owned by an individual	The owner
9. A valid trust, estate, or pension trust	Legal entity ⁴
10. Corporation or LLC electing corporate status on Form 8832 or Form 2553	The corporation
11. Association, club, religious, charitable, educational, or other tax-exempt organization	The organization
12. Partnership or multi-member LLC	The partnership
13. A broker or registered nominee	The broker or nominee

For this type of account:	Give name and EIN of:
14. Account with the Department of Agriculture in the name of a public entity (such as a state or local government, school district, or prison) that receives agricultural program payments	The public entity
15. Grantor trust filing under the Form 1041 Filing Method or the Optional Form 1099 Filing Method 2 (see Regulations section 1.671-4(b)(2)(i)(B))	The trust

¹ List first and circle the name of the person whose number you furnish. If only one person on a joint account has an SSN, that person's number must be furnished.

² Circle the minor's name and furnish the minor's SSN.

³ You must show your individual name and you may also enter your business or DBA name on the "Business name/disregarded entity" name line. You may use either your SSN or EIN (if you have one), but the IRS encourages you to use your SSN.

⁴ List first and circle the name of the trust, estate, or pension trust. (Do not furnish the TIN of the personal representative or trustee unless the legal entity itself is not designated in the account title.) Also see *Special rules for partnerships*, earlier.

***Note:** The grantor also must provide a Form W-9 to trustee of trust.

Note: If no name is circled when more than one name is listed, the number will be considered to be that of the first name listed.

Secure Your Tax Records From Identity Theft

Identity theft occurs when someone uses your personal information such as your name, SSN, or other identifying information, without your permission, to commit fraud or other crimes. An identity thief may use your SSN to get a job or may file a tax return using your SSN to receive a refund.

To reduce your risk:

- Protect your SSN,
- Ensure your employer is protecting your SSN, and
- Be careful when choosing a tax preparer.

If your tax records are affected by identity theft and you receive a notice from the IRS, respond right away to the name and phone number printed on the IRS notice or letter.

If your tax records are not currently affected by identity theft but you think you are at risk due to a lost or stolen purse or wallet, questionable credit card activity or credit report, contact the IRS Identity Theft Hotline at 1-800-908-4490 or submit Form 14039.

For more information, see Pub. 5027, Identity Theft Information for Taxpayers.

Victims of identity theft who are experiencing economic harm or a systemic problem, or are seeking help in resolving tax problems that have not been resolved through normal channels, may be eligible for Taxpayer Advocate Service (TAS) assistance. You can reach TAS by calling the TAS toll-free case intake line at 1-877-777-4778 or TTY/TDD 1-800-829-4059.

Protect yourself from suspicious emails or phishing schemes.

Phishing is the creation and use of email and websites designed to mimic legitimate business emails and websites. The most common act is sending an email to a user falsely claiming to be an established legitimate enterprise in an attempt to scam the user into surrendering private information that will be used for identity theft.

The IRS does not initiate contacts with taxpayers via emails. Also, the IRS does not request personal detailed information through email or ask taxpayers for the PIN numbers, passwords, or similar secret access information for their credit card, bank, or other financial accounts.

If you receive an unsolicited email claiming to be from the IRS, forward this message to phishing@irs.gov. You may also report misuse of the IRS name, logo, or other IRS property to the Treasury Inspector General for Tax Administration (TIGTA) at 1-800-366-4484. You can forward suspicious emails to the Federal Trade Commission at spam@uce.gov or report them at www.ftc.gov/complaint. You can contact the FTC at www.ftc.gov/idtheft or 877-IDTHEFT (877-438-4338). If you have been the victim of identity theft, see www.IdentityTheft.gov and Pub. 5027.

Visit www.irs.gov/IdentityTheft to learn more about identity theft and how to reduce your risk.

Privacy Act Notice

Section 6109 of the Internal Revenue Code requires you to provide your correct TIN to persons (including federal agencies) who are required to file information returns with the IRS to report interest, dividends, or certain other income paid to you; mortgage interest you paid; the acquisition or abandonment of secured property; the cancellation of debt; or contributions you made to an IRA, Archer MSA, or HSA. The person collecting this form uses the information on the form to file information returns with the IRS, reporting the above information. Routine uses of this information include giving it to the Department of Justice for civil and criminal litigation and to cities, states, the District of Columbia, and U.S. commonwealths and possessions for use in administering their laws. The information also may be disclosed to other countries under a treaty, to federal and state agencies to enforce civil and criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism. You must provide your TIN whether or not you are required to file a tax return. Under section 3406, payers must generally withhold a percentage of taxable interest, dividend, and certain other payments to a payee who does not give a TIN to the payer. Certain penalties may also apply for providing false or fraudulent information.

<div>APPLICATION FOR SUBDIVISION or SITE PLAN REVIEW</div> <div>SUSSEX COUNTY PLANNING BOARD County Administrative Center 1 Spring Street Newton, NJ 07860 (973) 579-0500</div>		FILE NUMBER _____ DATE RECEIVED _____ DATE COMPLETED _____ DATE PROCESSED _____ REVIEW DATE _____ ACTION DATE _____	
PRIOR APPLICATIONS	COUNTY NUMBER _____ ACTION TAKEN _____ DATE _____		
APPLICATION BY _____ FOR <div><input type="checkbox"/> CONCEPTUAL REVIEW <input type="checkbox"/> NEW APPLICATION <input type="checkbox"/> REQUIRED REVISION <input type="checkbox"/> REVISION BY APPLICANT <input type="checkbox"/> REVISION AFTER DISAPPROVAL</div>		MUNICIPALITY _____ BLOCK NUMBER _____ LOT(S) NUMBER _____ ZONE (EXISTING) _____ TAX MAP NUMBER _____ STREET ADDRESS _____	
SITE ABUTS	PRIVATE STREET OR RIGHT OF WAY _____ MUNICIPAL STREET _____ COUNTY ROAD NUMBER _____ STATE HIGHWAY _____ COUNTY PROPERTY _____ BLOCK _____		
SITE AFFECTS	COUNTY BRIDGE NO. _____ ON _____ DRAINAGE ON COUNTY ROAD _____ ROUTE _____		
SITE DEVELOPMENT IS SITE REQUIRES DEDICATION OF SITE REQUIRES EASEMENTS FOR WAIVERS REQUIRED FOR SITE CONTAINS			
<div><input type="checkbox"/> RESIDENTIAL <input type="checkbox"/> COMMERCIAL <input type="checkbox"/> INDUSTRIAL <input type="checkbox"/> (QUASI) PUBLIC</div> <div><input type="checkbox"/> ROADS <input type="checkbox"/> ADDITIONAL R.O.W. <input type="checkbox"/> OPENSOURCE <input type="checkbox"/> RECREATION AREAS</div> <div><input type="checkbox"/> DRAINAGE <input type="checkbox"/> SLOPE <input type="checkbox"/> SIGHT <input type="checkbox"/> SIGHT TRIANGLES <input type="checkbox"/> UTILITIES</div> <div><input type="checkbox"/> SIGHT DISTANCE <input type="checkbox"/> SIGHT TRIANGLES <input type="checkbox"/> OTHER _____</div> <div><input type="checkbox"/> FLOOD HAZARD AREAS <input type="checkbox"/> WETLANDS <input type="checkbox"/> OPEN WATER <input type="checkbox"/> DETENTION BASINS</div>			
TOTAL CONTIGUOUS LAND AREA OWNED (UNDER CONTRACT) BY APPLICANT _____ ACRES			
SUBDIVISION PROPOSES CREATION OF _____ NEW LOTS CONTAINING _____ ACRES			
SITE PLAN PROPOSES DEVELOPMENT (TOTAL DISTURBED AREA) OF _____ ACRES			
SITE PLAN PROPOSES DEVELOPMENT (BUILDING AREA) OF _____ SQ. FT.			
DEVELOPMENT PROPOSES DEDICATION OF ADDITIONAL RIGHTS OF WAY _____ ACRES			
DEVELOPMENT PROPOSES DEDICATION OF OPEN SPACE OF _____ ACRES			
<u>TYPE OF APPLICATION</u>			<u>FEE REQUIRED</u>
SITE PLAN	<input type="checkbox"/> PRELIMINARY <input type="checkbox"/> MINOR <input type="checkbox"/> FINAL	\$ _____	
PLANNED DEVELOPMENT	<input type="checkbox"/> PRELIMINARY <input type="checkbox"/> FINAL	\$ _____	
SUBDIVISION MINOR	<input type="checkbox"/> AGRICULTURAL <input type="checkbox"/> LOT CONSOLIDATION <input type="checkbox"/> LOT LINE RELOCATION <input type="checkbox"/> UNPERFECTED SUBDIVISION <input type="checkbox"/> MINOR	\$ _____	
SUBDIVISION TECHNICAL MAJOR	<input type="checkbox"/>	\$ _____	
SUBDIVISION MAJOR	<input type="checkbox"/> PRELIMINARY <input type="checkbox"/> FINAL	\$ _____	
AUTHORIZED ACTIONS		FEE \$ _____ CASH/ CHECK NO _____	
<input type="checkbox"/> EXEMPT		RECEIVED FROM _____	
<input type="checkbox"/> REVIEWED		DEPARTMENT REPRESENTATIVE _____	
<input type="checkbox"/> APPROVAL		DATE _____	

signature of person completing application

I / we hereby authorize the above named applicant to submit this application for the proposed development on my /our property.

The aforementioned decision was taken by the County Planning Board's Site Plan & subdivision Review Committee. Any question or appeal shall be directed to the Sussex County Planning

Department, as per N.J.S.A. 40:27-6.9.

Signature of Authorized Agent for: _____
Sussex County Planning Board

**SUSSEX COUNTY
DEPARTMENT OF ENGINEERING & PLANNING
County Administrative Center
One Spring Street
Newton, New Jersey 07860
Telephone (973) 579-0500 FAX (973) 579-0513**

APPLICATION REQUIREMENTS

SUBDIVISIONS: All subdivision applications must be submitted for review or approval by the County Planning Board

SITE PLANS: Site plan applications must be submitted when one of the following criteria is applicable:

1. Fronts on a County Road or abut County Property (for approval),
2. Affects a County drainage structure (for approval), or
3. Includes more than one acre of impervious surface (for review).

A **COMPLETE APPLICATION** consists of the following items:

1. One (1) copy of County's "Application for Subdivision and Site Plan Review", with signatures of applicant and all property owners,
2. One (1) copy of municipal application, including application for variances, if applicable.
3. One (1) set of plans prepared and sealed by a profession architect, engineer, or land surveyor, and a PDF copy of the plans on a CD.
4. A filing fee, with check made payable to the "Sussex County Planning Division". (See fee schedule.)
5. A copy of any traffic reports, drainage studies, Environmental Impact Statements, or other reports submitted with the application. The County prefers these reports to be submitted electronically (PDF file) on a CD or via email at awasiewicz@sussex.nj.us.
Please do not send paper copies of these reports.

DEVELOPMENT REVIEW PROCESS

A site plan or subdivision application should be submitted to the County at the same time it is submitted to the municipality. The County Planning Board's Development Review Committee must act within 30 days of receiving a complete application. Normally this Committee meets every other Monday or Tuesday throughout the year. Generally all applications received by Monday two weeks before the meeting are acted upon by the Committee.

CONCEPTUAL PLANS

The County encourages applicants to submit conceptual plans (no fee is charged) and meet with us early in the development process, before detailed plans are prepared. In this way, applicants can save time and money by knowing County requirements from the start.

If you have any questions, please call Antoinette Wasiewicz at 973-579-0500 Ext. 1329 and she will be glad to assist you.

**APPENDIX A
SUSSEX COUNTY PLANING BOARD
FEE SCHEDULE FOR DEVELOPMENT REVIEWS**

<u>MINOR SUBDIVISION (1)</u>	<u>REVIEW</u>	<u>OR</u>	<u>APPROVAL (2)</u>
Agricultural	\$ 40		\$100
Lot Consolidation	\$ 50		\$150
Lot Line Relocation	\$ 60		\$200
Classified Minor	\$200 + \$25/new lot		\$500 + \$100/new lot
Revision	n/a		\$ 75
Revision – County Disapproval	n/a		½ initial fee
Unperfected Subdivision	initial fee		initial fee
<u>MAJOR SUBDIVISIONS (1)</u>			
Technical	\$200 + \$25/new lot		\$500 + \$100/new lot
Preliminary	\$250 + \$25/new lot for up to 20 lots or \$750 + \$10/lot for 21 lots or more		\$800 + \$100/new lot for up to 20 lots or \$2,800 + \$30/lot for 21 lots or more
Final (3)	\$250 + \$20/new lot for up to 20 lots, or \$650 + 10/new lot for 21 lots or more		\$350 + \$20/new lot for up to 20 lots, or \$750 + \$10/new lot for 21 lots or more
Phase of Final (3)	Final fee, using number of lots in Phase		Final fee, using number of lots in Phase
Revision	n/a		\$100
Revision – County Disapproval	n/a		1/2 initial fee
Expired Preliminary	new fee		new fee
Extension on Preliminary	n/a		1/4 initial fee
<u>SITE PLAN (4)</u>			
Minor Site Plan	\$50		\$200 + \$50/acre or fraction
Preliminary Site Plan (Disturbed Area)	\$50 per acre or fraction maximum \$300		\$900 + \$100/acre or fraction** If over 100 parking spaces, add \$5 per parking space.
Final Site Plan	1/2 preliminary fee		1/2 preliminary fee
Revision	n/a		\$200
Revision – County Disapproval	n/a		1/2 initial fee
** Conservation Easement Rebate (effective February 1, 1993): A Rebate of \$40 per acre (or fraction) is authorized for Recreational Open Space that is subject to a Conservation Restriction. The procedure for obtaining the rebate is set forth in Resolution 395-93 of the Board of Chosen Freeholders, which is on file with the Sussex County Planning Division.			
<u>PLANNED UNIT DEVELOPMENT</u>			
Preliminary	n/a		\$2,000 + \$20/unit (or 1,000 sq. ft) up to 100 units Or \$4,000 + \$10/unit (or 1,000 sq. ft) for 101 units
Final	n/a		1/2 preliminary fee more
Revisions	n/a		same as Site Plan
<u>GENERAL DEVELOPMENT PLAN</u>			\$1,500 Deposit to be applied to
	future		applications

NOTES:

Applicants are encouraged to submit conceptual plans for review at no fee. For all applications declared incomplete or withdrawn by applicant, filing fee will not be returned but will be applied to a reactivated application, if submitted within 180 days of notification.

- (1) All Subdivisions are required to be submitted to the Sussex County Planning Board.
- (2) All Subdivisions and Site Plans fronting on a County road, adjacent to County property or with surface draining affecting a County draining structure shall require approval by the County Planning Board.
- (3) All final subdivision plants to be filed with the County Clerk require approvals from the County Planning Board.
- (4) All Site Plans proposing more than one acre of impervious surface shall be reviewed by the County Planning Board.

EFFECTIVE: January 26, 2006