

**DISCLAIMER**

**THIS IS AN UNOFFICIAL DOCUMENT UNTIL APPROVED BY GOVERNING BODY**

**AGENDA:**

**MAYOR AND BOROUGH COUNCIL**

**BUSINESS (X)**

**MEETING NO.3**

**REGULAR ( )**

**DATE: 1/27/14**

**7:00 P.M.**

**SPECIAL ( )**

\*\*\*\*\*

<b>ROLL CALL:</b>	Mayor Krenzel	( )			Atty: _____
	Clm. Guindi	( )	Clm. Jones	( )	Eng: _____
	Clm. Haussermann	( )	Clm. _____	( )	Adm: _____
	Clm. Hutchison	( )	Clm. Roselli	( )	: _____

\*\*\*\*\*

Public Announcement - Chapter 231, P. L. 1975

PUBLIC COMMENTS (agenda items only)

MINUTES

Minutes of Meeting No. 1 held on January 1, 2014

Minutes of Meeting No. 2 held on January 13, 2014

REPORTS

1. CFO/Treasurer
2. Professional staff
3. Departments

NEW BUSINESS

- Refund of electric consumer deposits (Attachment A)
- Refund of Municipal Lifeline deposits (Attachment B)
- Appoint Class I Special Law Enforcement Officer: Mark S. Delurey (Attachment C)
- Approve Change Order No. 1 – Human Services Building Renovations – Fine Wall Corporation (Attachment D)
- Release Performance Bond – Latosh Minor Subdivision and Variance Application (Attachment E)
- Approve Mercantile licenses: SR Multi Services LLC (Transfer) (Attachment F)
  - Galaxy Automotive (Attachment G)
  - D'Clase Boutique (Transfer) (Attachment H)
  - St. Mary's Coptic Orthodox Church School/Recreation Center (Attachment I)
- Vacated Republican Council seat (Attachment J)

UNFINISHED BUSINESS

- Generators
- Sale of surplus radios
- Employee/Supervisor Policy and Procedures Manual

COUNCIL COMMENTS

EXECUTIVE SESSION

- Property Acquisition
- Personnel
- Contracts

ADJOURNMENT

A, B

Request for Council Action

Date: 1/22/14

Resolution: ✓

Ordinance: \_\_\_\_\_

Other Reason for Request (Attach Back-up)

UTILITY REFUNDS  
MUNICIPAL LIFE/ME REFUNDS

Funds Appropriated:  yes     no     not applicable

[Signature]  
Department Head

[Signature]  
Approval/Disapproved Administrator

RESOLUTION

WHEREAS, the official utility records of the Borough of South River, New Jersey show certain refunds which include electric, water and consumer deposits (CD); and

WHEREAS, the Collector of Utility Revenue recommends that the following refunds should be made to the consumer noted herein below listed; and

NOW, THEREFORE BE IT AND IT IS HEREBY RESOLVED by the Borough Council of the Borough of South River that the Collector of Utility Revenue is hereby authorized to make the following refunds and adjustments indicated below and any attached list.

<u>ACCOUNT #</u>	<u>PAYABLE TO:</u>	<u>AMOUNT OF CHECK</u>
66-999-934-417 WTR PREV	JORGE COSTA 27 GRAND AVE SOUTH RIVER, NJ 08882	\$36.92
65-999-859-090 CD	DANIELLE HARE	\$169.84
65-999-859-090 ELEC CURRENT	220 WEST WHITETAIL RD GLENMORE, PA 19343	\$58.48
65-999-956-286 CD	ED HEARN C/O ANN HEARN 3440 CORINTH PKWY CORINTH, TX 76208	\$64.05
65-999-000-366 CD	J JANOSKO & M ASCHETTINO 3 WALNUT ST MONROE, NJ 08831	\$286.62
65-999-000-396 CD	ESTEBAN KOZAK & MARIA ASTRAIN 26 SOUTHSIDE AVE APT 1 SOUTH RIVER, NJ 08882	\$262.22
65-999-867-120 CD	GISELL LEAL	\$79.99
65-999-867-120 ELEC CURRENT	41D OBERT ST SOUTH RIVER, NJ 08882	\$133.15
65-999-000-933 ELEC PREV	LIGHTHOUSE SOUTH RIVER LG LLC	\$287.00
65-999-000-977 ELEC PREV	P O BOX 1524	\$81.32
65-999-001-024 ELEC PREV	ENGLEWOOD, NJ 07632	\$65.70
65-999-001-028 ELEC PREV		\$86.68
65-999-001-029 ELEC PREV		\$121.36
65-999-001-067 ELEC PREV		\$17.62
65-999-854-239 ELEC CURRENT	DANIEL LOPEZ 20-22 LELAND AVE SOUTH RIVER, NJ 08882	\$40.02
65-999-000-222 CD	ENEDINA LOPEZ 91 WHITEHEAD AVE APT A SOUTH RIVER, NJ 08882	\$142.20

66-999-972-631	WTR PREV	DAVID MARQUES 7 NOTTINGHILL CT ENGLISHTOWN, NJ 07726	\$180.13
65-999-932-482	ELEC CURRENT	ESTEBAN MARTINEZ 61 JACKSON ST SOUTH RIVER, NJ 08882	\$85.92
65-999-978-242	ELEC PREV	DENNIS MCKNIGHT 990 LEVY LOOP VIRGINIA BEACH, VA 23454	\$61.79
65-999-000-509	CD	HERRISON NASCIMENTO 8B EBERWEIN ST SOUTH RIVER, NJ 08882	\$276.80
65-999-000-460	ELEC CURRENT	ANTONIO OLIVAL 55 ARMSTRONG AVE SOUTH RIVER, NJ 08882	\$21.39
66-999-000-150	WTR PREV	PRINCETON ASSURANCE 2482 PENNINGTON RD PENNINGTON, NJ 08534	\$97.21
66-999-000-254	WTR PREV	ANTONIO & PAULO SANTOS P O BOX 317 SOUTH RIVER, NJ 08882	\$79.36
65-999-955-505	CD	MARIA SKANDALES 50 WILLETT AVE APT 3B SOUTH RIVER, NJ 08882	\$89.04
65-999-931-140	CD	SOUTH RIVER TRAVEL SERVICE	\$186.49
65-999-931-140	ELEC CURRENT	235 MAIN STREET SOUTH RIVER, NJ 08882	\$71.00
66-999-000-381	WTR PREV	US BANK CUST FOR PRO CAP II 50 SOUTH 16 <sup>TH</sup> ST SUITE 1950 PHILADELPHIA, PA 19102	\$20.03

DATED: FEBRUARY 10, 2014

/s/ \_\_\_\_\_  
Councilmember

/s/ \_\_\_\_\_  
Councilmember

B

RES: 2014-

FEBRUARY 10, 2014

RESOLUTION

WHEREAS, the official utility records of the Borough of South River, New Jersey show certain adjustments, recessions, amendments, cancellations, corrections, refunds and uncollectibles should be made on certain accounts due to various reasons; and

WHEREAS, the Utility Collector recommends these changes as listed; and

NOW, THEREFORE BE IT AND IT IS HEREBY RESOLVED that the Borough Utility Collector be and he is authorized to make the necessary adjustments, indicated below and any attached list.

**UTILITY CUSTOMER**

<u>ACCOUNT NUMBER</u>	<u>REASON</u>	<u>AUTH</u>	<u>YEAR</u>	<u>AMOUNT</u>
-----------------------	---------------	-------------	-------------	---------------

SKANDALES, MARIA 43 Division Street South River, NJ 08882 #65-999-955-505	Elec Credit	Refund	2013	\$158.38
	MUNICIPAL LIFELINE			

DATED: FEBRUARY 10, 2014

/s/ \_\_\_\_\_  
Councilmember

/s/ \_\_\_\_\_  
Councilmember



## SOUTH RIVER POLICE DEPARTMENT

Mark E. Tinitigan  
Chief of Police  
61 Main Street  
South River, NJ 08882-0548  
**Phone: (732) 238-1000**  
**Fax: (732) 613-6103**

January 20, 2014

To: Frederick C. Carr  
Business Administrator

From: Mark E. Tinitigan  
Chief of Police

Re: Class I Special Law Enforcement Officers

Frederick,

After the completion of an extensive background investigation, I am recommending the following candidate for the position of Class I Special Law Enforcement Officer, pending a comprehensive medical and psychological examination:

- Mark S. Delurey

Respectfully,

Mark E. Tinitigan  
Chief of Police  
South River Police Department

Cc: John Krenznel, Mayor  
Peter Guindi, Police Committee Chairperson  
James C. Jones, Police Committee  
John Trzeciak, Police Committee

D



# AIA® Document G701™ – 2001

## Change Order

<b>PROJECT</b> <i>(Name and address):</i> Borough of South River - Human Services Building 55 Reid Street South River, NJ 08882	<b>CHANGE ORDER NUMBER:</b> 001 <b>DATE:</b> January 15, 2014	<b>OWNER:</b> <input checked="" type="checkbox"/> <b>ARCHITECT:</b> <input checked="" type="checkbox"/> <b>CONTRACTOR:</b> <input checked="" type="checkbox"/> <b>FIELD:</b> <input type="checkbox"/> <b>OTHER:</b> <input type="checkbox"/>
<b>TO CONTRACTOR</b> <i>(Name and address):</i> Fine Wall Corporation 1404 Oak Tree Road Suite 204 Iselin, NJ 08830	<b>ARCHITECT'S PROJECT NUMBER:</b> 1321 <b>CONTRACT DATE:</b> November 15, 2013 <b>CONTRACT FOR:</b> General Construction	

**THE CONTRACT IS CHANGED AS FOLLOWS:**  
*(Include, where applicable, any undisputed amount attributable to previously executed Construction Change Directives)*  
 Furnish and install 3" thick roxyl AFB insulation at exterior walls. Add \$5,263.50

The original Contract Sum was	\$ 451,500.00
The net change by previously authorized Change Orders	\$ 0.00
The Contract Sum prior to this Change Order was	\$ 451,500.00
The Contract Sum will be increased by this Change Order in the amount of	\$ 5,263.50
The new Contract Sum including this Change Order will be	\$ 456,763.50

The Contract Time will be increased by Seven (7) days.  
 The date of Substantial Completion as of the date of this Change Order therefore is April 21, 2014

**NOTE:** This Change Order does not include changes in the Contract Sum, Contract Time or Guaranteed Maximum Price which have been authorized by Construction Change Directive until the cost and time have been agreed upon by both the Owner and Contractor, in which case a Change Order is executed to supersede the Construction Change Directive.

**NOT VALID UNTIL SIGNED BY THE ARCHITECT, CONTRACTOR AND OWNER.**

<u>Arcari &amp; Iovino Architects, P.C.</u> <b>ARCHITECT</b> <i>(Firm name)</i>	<u>Fine Wall Corporation</u> <b>CONTRACTOR</b> <i>(Firm name)</i>	<u>Borough of South River</u> <b>OWNER</b> <i>(Firm name)</i>
<u>One Katherine Street, Little Ferry, NJ 07643</u> <b>ADDRESS</b>	<u>1404 Oak Tree Road, Suite 204, Iselin, NJ 08830</u> <b>ADDRESS</b>	<u>48 Washington Street, South River, NJ 08882</u> <b>ADDRESS</b>
<u></u> <b>BY</b> <i>(Signature)</i>	<u></u> <b>BY</b> <i>(Signature)</i> <i>vice President</i>	<u></u> <b>BY</b> <i>(Signature)</i>
<u>Anthony Iovino</u> <i>(Typed name)</i>	<u>Umakant Shah</u> <i>(Typed name)</i>	<u><i>(Typed name)</i></u> <i>(Typed name)</i>
<u>1/15/2014</u> <b>DATE</b>	<u>01/15/2014</u> <b>DATE</b>	<u><i>(Typed name)</i></u> <b>DATE</b>

**FINE WALL CORPORATION**

1404 Oak Tree Road,  
Suite #204  
Iselin, NJ 08830

Tel: 732-283-8210  
Fax: 732-283-1221

Date: 01/14/2014

To: Arcari & Iovino Architects  
One Katherine Street  
Little Ferry NJ 07643

Attn: Dariusz Bona

Proj Human Services Building Renovation  
55 Reid St, South River, NJ- 08882 Bid dated 09/13/13.

Ref : Extra Insulation at exterior walls

(A) Extra Work order: To Furnish & Install 3" thick roxyl AFB insulation ( Unfaced) in between existing metal stud framing including labor,materials ,shipping/handling etc complete. This is required in order to get the building inspection carried out so that we can continue working.

(a) Materials in Shipping/handling etc complete ----- \$ 1,998.00  
(b) Labor Carpenter 1 Man at 3 days at 8 Hrs = 32 Hrs at \$ 98/Hr ----- \$ 2352.00

-----  
Cost ----- \$ 4,350.00  
10 % OH ----- \$ 435.00

-----  
\$ 4,785.00  
10 % Profit ----- \$ 478.50

-----  
TOTAL ADD ----- \$ 5,263.50

Pl.Note : We need 7 days extension for the above work as because it interrupted our continuous progress of work.

Please approve , issue C.O so that we can continue working ASAP please.

Thank you,

Sincerely,  
FINE WALL CORPORATION

Umakant N Shah  
Vice President

**FINE WALL CORPORATION**

1404 Oak Tree Road,  
Suite #204  
Iselin, NJ 08830

Tel: 732-283-8210

Fax: 732-283-1221

**Date:** 01/14/2014

**To:** Arcari & Iovino Architects  
One Katherine Street  
Little Ferry NJ 07643

**Attn:** Dariusz Bona

**Proj:** Human Services Building Renovation  
55 Reid St, South River, NJ- 08882

**Ref:** 3" Roxul insulation at Ext walls

Dariusz,

Please find enclosed herewith revised extra cost of 3" Roxul insulation at Ext walls with following clarification.

(1) Insulation is measured & priced by Sqft. It is in about 250 LF of exterior walls by 8' -0" Height.

(2) Extension time we need as because our continuous operation got interrupted.  
Thank you,

Sincerely,  
**FINE WALL CORPORATION**

**Umakant N Shah**  
Vice President

E



JOHN H. ALLGAIER, 1983-01  
DAVID J. SAMUEL, P.E., P.P.  
JOHN J. STEFANI, P.E., L.S., P.P.  
JAY B. CORNELL, P.E., P.P.  
MICHAEL J. McCLELLAND, P.E., P.P.  
GREGORY R. VALES, P.E., P.P.

TIMOTHY W. GILLEN, P.E., P.P.  
BRUCE M. KOCH, P.E., P.P.  
LOUIS J. PLOSKONKA, P.E.  
TREVOR J. TAYLOR, P.E., P.P.  
BEHRAM TURAN, P.E.

January 13, 2014

Mayor and Borough Council  
Borough of South River  
48 Washington Street  
South River, New Jersey 08882

**RE: Latosh Minor Subdivision and Variance Application**  
**Block 72, Lot 1.04**  
**South River, New Jersey**  
**Our File No.: PSRP0072.01/630.01**  
**South River File No.: 10-01**

Dear Mayor and Borough Council:

The developer of the above referenced project has requested release of the Performance Bond for same. We reviewed the site in the field and found all of the required work has been completed. Accordingly, the Performance Bond can be released subject to the following:

- Posting of a 2 year Maintenance Bond in the amount of \$1,134.00
- Payment of any outstanding engineering inspection fees.
- Payment of any outstanding Borough fees.

Should you have any questions regarding this matter, please do not hesitate to contact this office.

Very truly yours,

Bruce M. Koch, P.E., P.P., C.M.E.  
Borough Engineer's Office

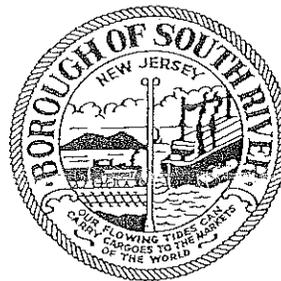
BMK/sm

cc: All Council Members  
Borough Administrator  
Borough Clerk  
Borough Attorney  
Chief Financial Officer  
Borough Construction Official  
Sergey and Ala Latosh



BOROUGH OF SOUTH RIVER  
 48 WASHINGTON STREET  
 SOUTH RIVER, NJ 08882  
 PHONE 732-257-1999  
 FAX 732-613-6105

F



**APPLICATION FOR MERCANTILE LICENSE**

FEES:  
 \$50.00 NEW   
 \$25.00 Transfer

NAME OF BUSINESS SR Multi Services LLC  
 PROPOSED LOCATION 410 Oberst Sr. South River, NJ 08882  
 BLOCK# 158 LOT# 18  
 BUSINESS TELEPHONE (732) 390-0181 *(PREVIOUS LOCATION) (95 WHITETOWN AVE)*  
 NATURE OF BUSINESS (Describe Operation)

TRAVEL AGENCY

**APPLICANT INFORMATION**

NAME GISEW LEAL  
 HOME ADDRESS \_\_\_\_\_  
 CITY, STATE, ZIP \_\_\_\_\_  
 TELEPHONE# HOME \_\_\_\_\_ CELL \_\_\_\_\_  
 DATE OF BIRTH \_\_\_\_\_ SOCIAL SECURITY # \_\_\_\_\_  
 DRIVER'S LICENSE# \_\_\_\_\_

ATTACH A COPY OF YOUR DRIVERS LICENSE - Address on your identification must match the address on this application.

**PROPOSED BUSINESS AT THIS LOCATION:**

NUMBER OF EMPLOYEES 0  
 DAYS AND HOURS OF OPERATION MONDAY to Saturday - 10:AM to 6PM  
 SQ. FOOTAGE OF AREA TO BE OCCUPIED 900 SQ FT  
 OFF STREET PARKING SPACES AVAILABLE TO SPACE BEING OCCUPIED # \_\_\_\_\_

DOES OPERATION INVOLVE USE OR STORAGE OF FLAMMABLE/COMBUSTIBLE OR HAZARDOUS MATERIALS \_\_\_\_\_ YES  NO IF YES, SUPPLY QUANTITIES AND MSDS SHEETS ON PRODUCTS INVOLVED (ATTACH TO APPLICATION)

BOROUGH USE ONLY: REFFERAL DATE \_\_\_\_\_

DEPARTMENT	APPROVAL/DENIAL	SIGNATURE	DATE
Zoning/Building	<i>OK</i>	<i>GLW</i>	<i>12/17/13</i>
Police	<i>OK</i>	<i>DL</i>	<i>12/18/13</i>
Fire Prevention	<i>OK</i>	<i>BL</i>	<i>12/18/13</i>
Health	<i>OK</i>	<i>EO</i>	<i>12/18/13</i>

NAME SR Multi Services LLC

**PREVIOUS BUSINESS AT THIS LOCATION:**

**DESCRIBE OPERATION OF PREVIOUS BUSINESS**

Travel Agency

NUMBER OF EMPLOYEES AT PREVIOUS BUSINESS 0 PARKING SPOTS \_\_\_\_\_

IF CORPORATION: The information below is required for each officer and each stockholder owning 10% or more of the stock. List the name, address and phone number of each registered agent:

NAME \_\_\_\_\_ NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_ ADDRESS \_\_\_\_\_

PHONE # \_\_\_\_\_ PHONE # \_\_\_\_\_

NAME, ADDRESS AND PHONE OF ATTORNEY (IF ANY):

**PLEASE ANSWER THE FOLLOWING:**

Applicant(s) ever been denied a license to conduct a business  YES  NO  
If YES, describe in detail. (Date, business, location)

Applicant(s) ever been arrested or convicted of a crime, or violation of any municipal ordinance in the Borough of South River or any other municipality, other than traffic offenses?  
 YES  NO

Is applicant currently the subject of any outstanding warrants?  YES  NO

If YES to the above, set forth the date and place of the offense, nature of the offense and the punishment or penalty imposed. (Date, location, disposition)

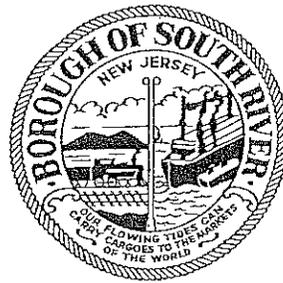
The undersigned makes these statements above to induce the Borough of South River to issue the license herein applied for and agrees to comply with all laws and ordinances of the Borough applicable to the subject business above referred to. I certify the information contained in this application is true and correct.

Gina L. [Signature]  
Applicant Signature

12/09/2013  
Date

BOROUGH OF SOUTH RIVER  
 48 WASHINGTON STREET  
 SOUTH RIVER, NJ 08882  
 PHONE 732-257-1999  
 FAX 732-613-6105

G



**APPLICATION FOR MERCANTILE LICENSE**

FEES:  
 \$50.00 NEW   
 \$25.00 Transfer

NAME OF BUSINESS GALAXY AMBULANCE LLC

PROPOSED LOCATION 127 William St.

BLOCK# 84 LOT# 1.2

BUSINESS TELEPHONE TEL 800-596-5222 FAX 877-596-5011

NATURE OF BUSINESS (Describe Operation)

Non EMERGENCY MEDICAL TRANSPORTATION

**APPLICANT INFORMATION**

NAME EVRENH ASHUROV

HOME ADDRESS \_\_\_\_\_

CITY, STATE, ZIP \_\_\_\_\_

TELEPHONE# HOME \_\_\_\_\_ CELL \_\_\_\_\_

DATE OF BIRTH \_\_\_\_\_ SOCIAL SECURITY # \_\_\_\_\_

DRIVER'S LICENSE# \_\_\_\_\_

ATTACH A COPY OF YOUR DRIVERS LICENSE - Address on your identification must match the address on this application.

**PROPOSED BUSINESS AT THIS LOCATION:**

NUMBER OF EMPLOYEES 5

DAYS AND HOURS OF OPERATION MON-FRI 8:00 AM - 6:00 PM

SQ. FOOTAGE OF AREA TO BE OCCUPIED 975 SF.

OFF STREET PARKING SPACES AVAILABLE TO SPACE BEING OCCUPIED # 10

DOES OPERATION INVOLVE USE OR STORAGE OF FLAMMABLE/COMBUSTIBLE OR HAZARDOUS MATERIALS \_\_\_\_\_ YES  NO IF YES, SUPPLY QUANTITIES AND MSDS SHEETS ON PRODUCTS INVOLVED (ATTACH TO APPLICATION)

BOROUGH USE ONLY:

REFERRAL DATE \_\_\_\_\_

DEPARTMENT	APPROVAL/DENIAL	SIGNATURE	DATE
Zoning/Building	<i>[Signature]</i>	<i>[Signature]</i>	1/20/14
Police	<i>[Signature]</i>	<i>[Signature]</i>	1/21/14
Fire Prevention	<i>[Signature]</i>	<i>[Signature]</i>	1/20/14
Health	<i>[Signature]</i>	<i>[Signature]</i>	1/21/14

NAME EVRIKH ASHUROV

PREVIOUS BUSINESS AT THIS LOCATION: NON EMERGENCY MEDICAL TRANSPORT  
(STRETCHER, WHEELCHAIR, AMBULATORY)

DESCRIBE OPERATION OF PREVIOUS BUSINESS

501 HARTLE ST. SUITE 501 SAYREVILLE NJ 08872

NUMBER OF EMPLOYEES AT PREVIOUS BUSINESS 5 PARKING SPOTS 8

IF CORPORTATION: The information below is required for each officer and each stockholder owning 10% or more of the stock. List the name, address and phone number of each registered agent:

NAME LYDOMILA ASHUROVA 51% NAME LEONARD GUREVICH 49%

ADDRESS 8 PERIWINKLE CT. ADDRESS 8 PERIWINKLE CT.

EAST BRUNSWICK NJ 08816 EAST BRUNSWICK NJ 08816

PHONE # 800-596-5222 PHONE # 800-596-5222

NAME, ADDRESS AND PHONE OF ATTORNEY (IF ANY):

PLEASE ANSWER THE FOLLOWING:

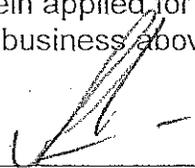
Applicant(s) ever been denied a license to conduct a business YES  NO  
If YES, describe in detail. (Date, business, location)

Applicant(s) ever been arrested or convicted of a crime, or violation of any municipal ordinance in the Borough of South River or any other municipality, other than traffic offenses?  
YES  NO

Is applicant currently the subject of any outstanding warrants? YES  NO

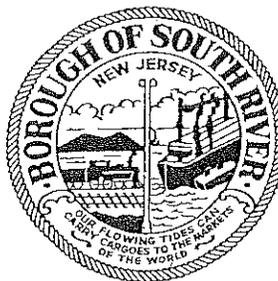
If YES to the above, set forth the date and place of the offense, nature of the offense and the punishment or penalty imposed. (Date, location, disposition)

The undersigned makes these statements above to induce the Borough of South River to issue the license herein applied for and agrees to comply with all laws and ordinances of the Borough applicable to the subject business above referred to. I certify the information contained in this application is true and correct.

  
Applicant Signature

01-20-2014  
Date

H



BOROUGH OF SOUTH RIVER  
48 WASHINGTON STREET  
SOUTH RIVER, NJ 08882  
PHONE 732-257-1999  
FAX 732-613-6105

**APPLICATION FOR MERCANTILE LICENSE**

FEES:  
\$50.00 NEW   
\$25.00 Transfer

NAME OF BUSINESS D'clase Boutique

PROPOSED LOCATION 56-58 MAIN ST. store No 1

BLOCK# \_\_\_\_\_ LOT# \_\_\_\_\_

BUSINESS TELEPHONE 732-307-7041

*Moving to  
STORE NEXT  
TO THEIR  
PRESENT  
ADDRESS.*

NATURE OF BUSINESS (Describe Operation)

Clothing store, retail cell phones, Precious Metal buying

**APPLICANT INFORMATION**

NAME Hector Compres. Santos

HOME ADDRESS \_\_\_\_\_

CITY, STATE, ZIP \_\_\_\_\_

TELEPHONE# HOME          CELL         

DATE OF BIRTH          SOCIAL SECURITY #         

DRIVER'S LICENSE#         

*3/5/13*

ATTACH A COPY OF YOUR DRIVERS LICENSE - Address on your identification must match the address on this application.

**PROPOSED BUSINESS AT THIS LOCATION:**

NUMBER OF EMPLOYEES 2

DAYS AND HOURS OF OPERATION Monday - Sunday M - Saturday 10:00 to 9:00

*Background  
check done  
for Prec. metals  
app.*

SQ. FOOTAGE OF AREA TO BE OCCUPIED \_\_\_\_\_

*Sunday = 11:00 - 7:00*

OFF STREET PARKING SPACES AVAILABLE TO SPACE BEING OCCUPIED # 1

DOES OPERATION INVOLVE USE OR STORAGE OF FLAMMABLE/COMBUSTIBLE OR HAZARDOUS MATERIALS          YES  NO  IF YES, SUPPLY QUANTITIES AND MSDS SHEETS ON PRODUCTS INVOLVED (ATTACH TO APPLICATION)

BOROUGH USE ONLY: REFFERAL DATE \_\_\_\_\_

DEPARTMENT	APPROVAL/DENIAL	SIGNATURE	DATE
Zoning/Building	<i>OK</i>	<i>CO</i>	<i>12/22/12</i>
Police	<i>OK</i>	<i>MT</i>	<i>11/24/12</i>
Fire Prevention	<i>OK</i>	<i>ECO</i>	<i>11/15/12</i>
Health	<i>OK</i>	<i>ECO</i>	<i>12/3/12</i>

NAME D'clase Boutique

PREVIOUS BUSINESS AT THIS LOCATION: 56-58 MAIN ST.

DESCRIBE OPERATION OF PREVIOUS BUSINESS

clothing store, cell phones, Money transfer, Jewelry buy.

NUMBER OF EMPLOYEES AT PREVIOUS BUSINESS 2 PARKING SPOTS 1

IF CORPORATION: The information below is required for each officer and each stockholder owning 10% or more of the stock. List the name, address and phone number of each registered agent:

NAME \_\_\_\_\_ NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_ ADDRESS \_\_\_\_\_

PHONE # \_\_\_\_\_ PHONE # \_\_\_\_\_

NAME, ADDRESS AND PHONE OF ATTORNEY (IF ANY):

PLEASE ANSWER THE FOLLOWING:

Applicant(s) ever been denied a license to conduct a business YES  NO

If YES, describe in detail. (Date, business, location)

Applicant(s) ever been arrested or convicted of a crime, or violation of any municipal ordinance in the Borough of South River or any other municipality, other than traffic offenses?

YES  NO

Is applicant currently the subject of any outstanding warrants? YES  NO

If YES to the above, set forth the date and place of the offense, nature of the offense and the punishment or penalty imposed. (Date, location, disposition)

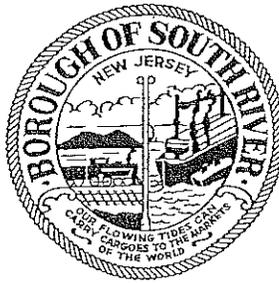
N/A

The undersigned makes these statements above to induce the Borough of South River to issue the license herein applied for and agrees to comply with all laws and ordinances of the Borough applicable to the subject business above referred to. I certify the information contained in this application is true and correct.

Hector Campos  
Applicant Signature

11-20-13  
Date

I



BOROUGH OF SOUTH RIVER  
48 WASHINGTON STREET  
SOUTH RIVER, NJ 08882  
PHONE 732-257-1999  
FAX 732-613-6105

**APPLICATION FOR MERCANTILE LICENSE**

FEES:  
\$50.00 NEW   
\$25.00 Transfer

NAME OF BUSINESS ST. MARY'S COPTIC ORTHODOX CHURCH  
PROPOSED LOCATION 80 DAVID STREET  
BLOCK# 339 LOT# 1  
BUSINESS TELEPHONE (732) 613-1441  
NATURE OF BUSINESS (Describe Operation)  
SCHOOL / RECREATION CENTER

**APPLICANT INFORMATION**

NAME ST MARY'S COPTIC ORTHODOX CHURCH  
HOME ADDRESS \_\_\_\_\_  
CITY, STATE, ZIP \_\_\_\_\_  
TELEPHONE# HOME \_\_\_\_\_ CELL \_\_\_\_\_  
DATE OF BIRTH \_\_\_\_\_ SOCIAL SECURITY # \_\_\_\_\_  
DRIVER'S LICENSE# NJ

ATTACH A COPY OF YOUR DRIVERS LICENSE - Address on your identification must match the address on this application.

PROPOSED BUSINESS AT THIS LOCATION: PAROCHIAL SCHOOL / RECREATION CENTER

NUMBER OF EMPLOYEES 10  
DAYS AND HOURS OF OPERATION M-F 8:30 AM - 6:00 PM - SCHOOL  
RECREATION CENTER 4:00 PM - 9:30 PM  
M-F  
SAT/SUN 10:00 AM - 6:00 PM  
SQ. FOOTAGE OF AREA TO BE OCCUPIED EXISTING BUILDING  
OFF STREET PARKING SPACES AVAILABLE TO SPACE BEING OCCUPIED # 75

DOES OPERATION INVOLVE USE OR STORAGE OF FLAMMABLE/COMBUSTIBLE OR HAZARDOUS MATERIALS \_\_\_\_\_ YES  NO IF YES, SUPPLY QUANTITIES AND MSDS SHEETS ON PRODUCTS INVOLVED (ATTACH TO APPLICATION)

BOROUGH USE ONLY: REFFERAL DATE \_\_\_\_\_

DEPARTMENT	APPROVAL/DENIAL	SIGNATURE	DATE
Zoning/Building	<u>OK</u>	<u>GL</u>	<u>10/21/13</u>
Police	<u>OK</u>	<u>DN</u>	<u>10/22/13</u>
Fire Prevention	<u>OK</u>	<u>AL</u>	<u>9/24/13</u>
Health	<u>OIL</u>	<u>EG</u>	<u>11/26/13</u>

NAME ST MARY'S COPTHORPE ALTHORPE CHURCH

PREVIOUS BUSINESS AT THIS LOCATION: SCHOOL / RECREATION CENTER

DESCRIBE OPERATION OF PREVIOUS BUSINESS

COPUS CHARIST SCHOOL ( MEMORIAL SCHOOL

NUMBER OF EMPLOYEES AT PREVIOUS BUSINESS 40 PARKING SPOTS 75

IF CORPORTATION: The information below is required for each officer and each stockholder owning 10% or more of the stock. List the name, address and phone number of each registered agent:

NAME n/a NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_ ADDRESS \_\_\_\_\_

PHONE # \_\_\_\_\_ PHONE # \_\_\_\_\_

NAME, ADDRESS AND PHONE OF ATTORNEY (IF ANY):

PLEASE ANSWER THE FOLLOWING:

Applicant(s) ever been denied a license to conduct a business  YES  NO  
If YES, describe in detail. (Date, business, location)

Applicant(s) ever been arrested or convicted of a crime, or violation of any municipal ordinance in the Borough of South River or any other municipality, other than traffic offenses?  
 YES  NO

Is applicant currently the subject of any outstanding warrants?  YES  NO

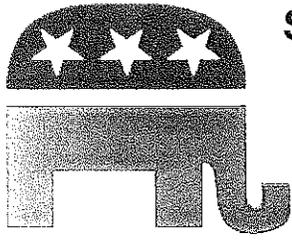
If YES to the above, set forth the date and place of the offense, nature of the offense and the punishment or penalty imposed. (Date, location, disposition)

The undersigned makes these statements above to induce the Borough of South River to issue the license herein applied for and agrees to comply with all laws and ordinances of the Borough applicable to the subject business above referred to. I certify the information contained in this application is true and correct.

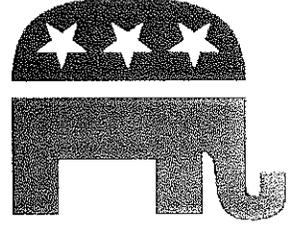
Applicant Signature

Date

J



South River Republican Organization  
P. O. Box 373  
South River, NJ 08882



January 16, 2014

TO: The Mayor and Council of the Borough of South River

FROM: John M. Krenzel  
Chairman of the South River Republican Organization

Re: Three Name Submission To Fill the Unexpired Term of Vacated Republican Seat

Gentlemen:

In accordance with NJS 40A:16-11, the South River Republican Organization has until January 31, 2014, to submit three names to the Borough Council for its consideration for appointment to the vacated Council position formerly held by Councilman John Trzeciak. Please be advised that the South River Republican Organization has duly met and has decided upon three nominees to submit to the Borough Council for the position. The names of the nominees are:

Raymond Eppinger of 10 Theresa Place

James Gurchensky of 27 Northern Street

Michael Trenga of 74 George Street

If you have any questions concerning the above, please contact me.

Very truly yours,

JOHN M. KRENZEL  
Chairman

RECEIVED  
BOROUGH OF SOUTH RIVER  
2014 JAN 17 AM 8:09

RECEIVED  
BOROUGH OF SOUTH RIVER  
2014 JAN 16 AM 8:25

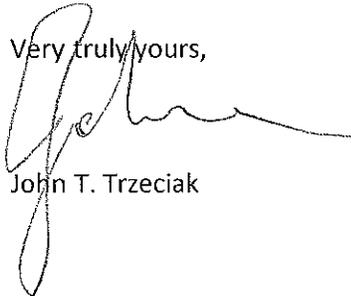
January 14, 2014

Dear Mr. Mayor:

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After careful consideration and with a heavy heart, I must resign my position as a South River Councilman. Personal reasons have overtaken me and I feel that I cannot serve the citizens of South River as I was elected to do. Please extend my good wishes to all the people. I thank them for their trust in me and I know that they will be better served by another Republican who can put their full time into the position as Councilman.

Very truly yours,

A handwritten signature in black ink, appearing to read "John T. Trzeciak". The signature is fluid and cursive, with a long horizontal stroke extending to the right.

John T. Trzeciak