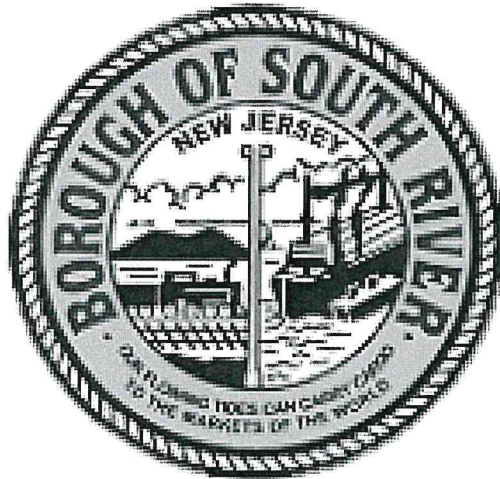


**BOROUGH OF SOUTH RIVER
MIDDLESEX COUNTY – STATE OF NEW JERSEY**

VARIANCE APPLICATION



48 WASHINGTON STREET * SOUTH RIVER, NJ 08882

P. (732) 257-1999 Ext. 516 * F. (732) 613-6105

www.southernrivernj.org

VARIANCE APPLICATION SUBMISSION

CHECK LIST

DO YOU HAVE THE FOLLOWING

- ☐ Variance Application (16 copies)
- ☐ Zoning Official denial letter from the Zoning Dept. (16 copies)
- ☐ Supporting Documents (16 copies)
- ☐ Plans (16 copies)
- ☐ Appropriate Application and Escrow Fees * (1 copy each Fee Sheet)
- ☐ W – 9 Form (1 copy)
- ☐ Property List request form along with \$10 fee *
- ☐ If the applicant is an LLC or Corporation, you must be represented by an attorney

WHAT HAPPENS NEXT?

NOTICE: The Technical Review Committee (TRC) will review applications for larger developments prior to any submission.

The application is submitted to the Board's Professionals for review:

- ☐ You will receive the Professionals' Report for your review.
- ☐ You will be notified of your completeness date.
- ☐ The Board recommends you attending the completeness hearing.
- ☐ At the completeness hearing the Board will either deem your application to be complete or incomplete.

IF DEEMED COMPLETE

You will be notified informing you of your Public Hearing Date. The letter will also inform you to adequately notice the residents within 200' of the property and to publish the hearing date in the Homes News Tribune. ***This must be completed a minimum of ten (10) business days prior to the meeting.***

If supporting documents and/or plans are required prior to your Public Hearing, they must be **submitted minimum of fourteen (14) days prior to the Public Hearing along with resubmission fees**. If fees are not submitted with documents, you will not be heard until fees are current.

IF DEEMED INCOMPLETE

You will be notified informing you that your application was deemed incomplete by the Board. Completeness reports from the Board's Planner and/or Engineer was submitted to you prior to the Completeness Hearing. Please take care to re-review the report and respond to all concerns and resubmit the corrections and/or documentations and/or revised plans, along with the required resubmission application and escrow fees to the Board's Secretary located at 48 Washington Street, South River, NJ 08882. **Submission and fees must be received by the Borough no later than minimum of fourteen (14) days prior to your next hearing.**

** Separate checks for Application, Escrow & Property List Fees are all made payable to the Borough of South River*



BOROUGH OF SOUTH RIVER
APPLICATION FOR VARIANCE

Date Received

THIS FULLY COMPLETED FORM MUST BE FILED WITH THE BOARD SECRETARY AT LEAST FIFTEEN (15) DAYS PRIOR TO THE SCHEDULED HEARING.

Applicant's Name:	_____	Application Number:	_____
Applicant's Address	_____	Block #	_____ Lot # _____
	_____	Application Fee:	_____
Phone:	_____	Escrow Fee:	_____
Contact Email:	_____	Date Filed:	_____

- If applicant is not the legal owner of the property, please provide the following:
 - Name of owner: _____
 - Address of owner: _____
 - Applicant's interest in the property: _____ Date interest was acquired: _____
 - If you are not the property owner you must attach a letter of authority from the property owner authorizing the applicant to act on his/her behalf for the purpose of this application, or a Copy of Contract of Sale of the Property.
- Please select all that apply: Bulk Variance ☐ Use Variance ☐ Other ☐ Specify: _____

- Please list each variance you are requesting and state the why the variance(s) is needed:

- The premises affected are located at: _____
And shown on the Official Tax Map, Block # _____, Lot # _____, Zoning District: _____
Size of Lot: Width: _____ (ft.) Depth: _____ (ft.) Area: _____ (square feet)
Size of Building: Width: _____ (ft.) Depth: _____ (ft.) Area: _____ (square feet)
Main building setbacks: Proposed front setback: _____ (ft.) Proposed rear setback: _____ (ft.)

Proposed left side setback: _____ (ft.) Proposed right side setback: _____ (ft.)

Proposed number of stories: _____ Building height in feet: _____ (ft.)

Percent of lot coverage by all buildings: Existing: _____ % Proposed: _____ %

Percent of lot coverage by all buildings and pavement: Existing: _____ % Proposed: _____ %

Accessory building will be set back from: Side property line: _____ (ft) Rear property line: _____ (ft)

5. Present type of occupancy or use: _____
6. Proposed type of occupancy of use: _____
7. Attach in duplicate, an original sealed survey of the site showing the actual dimensions of the site under consideration.
8. Attach in duplicate, a sealed plan drawn to scale showing the actual dimensions of the site under consideration, proposed locations of buildings and accurate dimensions thereof. If any signs or other design elements are proposed, attach a drawing showing dimension and details. The above plan or sketch shall bear the seal of a licensed professional engineer or architect in the State of New Jersey or in lieu thereof an affidavit sworn to the person who prepared them as to the accuracy of measurements thereon.
9. Office of the Tax Collector Verification (To be completed by the Tax Search Officer of the Borough of South River)

The Tax records at this office indicate that there ☐ are, ☐ are not delinquent taxes or assessments on the above described properties know as Block: _____, Lot: _____.

/s/ _____

Tax Search Officer

I swear or affirm that made by me are true. I am aware that if any of the forgoing statements made by me are willfully false, I am subject to punishment by contempt of court.

Applicant's Signature

Applicant's Name

Date

Sworn and subscribed before me,

This _____ day of _____, 20____

Notary Public, State of New Jersey

APPLICATION #

PROPERTY LOCATION:

Block:

Lot:

APPLICANT NAME:

Cell Phone:

Email:

ATTORNEY INFORMATION:

Name:

Address:

Email:

Phone:

ARCHITECT INFORMATION:

Name:

Address:

Email:

Phone:

ENGINEER INFORMATION:

Name:

Address:

Email:

Phone:

**BOROUGH OF SOUTH RIVER
APPLICATION FEE CALCULATION SHEET**

Applicant's Name: _____	Application Number: _____
Applicant's Address: _____	Block #: _____ Lot #: _____
Owner's Name: _____	Street Address: _____
Owner's Address: _____	Calculated By: _____
Contact Phone #: _____	Date Calculated: _____
Contact Email: _____	_____

1. **VARIANCES**
 - a. "a" or appeal of an administrative decision: \$75.00 \$ _____
 - b. "b" or interpretation of zoning map or ordinance: \$75.00 \$ _____
 - c. "c" -each new single or 2-family residential bulk variance: \$75.00 \$ _____
-each multi-family or new non-residential bulk variance \$100.00 \$ _____
 - d. "d" or use variance: \$250.00 \$ _____
 - e. Conditional use approval: \$250.00 plus any site plan/subdivision fees \$ _____

2. **CERTIFICATE OF PRE EXISTING NON-CONFORMING USE (NJSA 40:55-D-68)** \$250.00 \$ _____

3. **SITE PLANS**
 - a. Minor Site Plans: \$300.00 \$ _____
 - b. (Preliminary) Major Site Plan: \$300.00 base fee & \$ _____
 - c. (Final) Major Site Plan: \$200.00 base fee \$ _____
 - d. Site Plan Waiver Request Application Fee: \$150.00 \$ _____

4. **SUBDIVISIONS**
 - a. Minor subdivision: \$250.00 base fee + \$100.00 per each lot created \$ _____
 - b. (Preliminary) Major Subdivision: \$250.00 base fee + \$100.00 ea. lot created \$ _____
(Final) Major Subdivision: \$250.00 \$ _____

5. **RESUBMISSIONS**
 - a. Submission of each revised plat including but not limited to: minor preliminary or final site plan, or subdivision, sketch plat, use variance plan or resubmission of revised plan in accordance with any conditions of any approval.
Total original application fee \$ _____ x 50% = \$ _____

6. **APPLICATIONS INVOLVING UTILITY EXTENTIONS or SPECIAL DESIGN ELEMENTS**
 - Base fee + \$100.00 per lot for extension of sewer utilities \$ _____
 - Base fee + \$50.00 per lot for extension of sewer utilities \$ _____
 - Base fee + \$700.00 flat fee for pump station or other special design facility \$ _____

TOTAL ORIGINAL APPLICATION FEE DUE: \$

Original application fee submitted by applicant: \$ _____

Check #: # _____

BALANCE of application fee still due: \$ _____

EACH REVISED SUBMISSION APPLICATION FEE DUE: \$

Revised submission application fee submitted by applicant: \$ _____

Check #: # _____

BALANCE of revised application fee still due: \$ _____

BOROUGH OF SOUTH RIVER
ESCROW DEPOSIT FEE CALCULATION SHEET

Applicant's Name: _____	Application Number: _____
Applicant's Address: _____	Block #: _____ Lot #: _____
Owner's Name: _____	Street Address: _____
Owner's Address: _____	Calculated By: _____
Contact Phone: _____	Date Calculated: _____
Contact Email: _____	_____

1. VARIANCES

- | | |
|---|----------|
| d. "a" or appeal of an administrative decision: \$600.00 | \$ _____ |
| e. "b" or interpretation of zoning map or ordinance: \$400.00 | \$ _____ |
| f. "c" -single or 2-family residential bulk variances: \$700.00 | \$ _____ |
| -multi-family or new non-residential bulk variance \$1,000.00 | |
| d. "d" or use variance: \$1,000.00 | \$ _____ |
| e. Conditional use approval: \$1,250.00 plus any site plan/subdivision fees | \$ _____ |

2. CERTIFICATE OF PRE EXISTING NON-CONFORMING USE (NJSA 40:55-D-68) \$600.00

\$ _____

3. SITE PLANS

- | | |
|--|----------|
| c. <u>Minor Site Plans</u> : \$2,500.00 | \$ _____ |
| d. <u>(Preliminary) Major Site Plan</u> | |
| 1. Residential development of 1-10 units: \$2,500.00 | |
| 2. Residential development of 11 or more units: \$5,000.00 | \$ _____ |
| 3. Non Residential or mixed uses: \$5,000.00 | \$ _____ |
| 4. Non residential uses over 5,000 SF GFA: \$10,000.00 | \$ _____ |
| c. <u>(Final) Major Site Plan</u> : \$1,500.00 | \$ _____ |
| d. <u>Site Plan Waiver Request Escrow Fee</u> : \$300.00 | \$ _____ |

SUBDIVISIONS

- | | |
|--|----------|
| 4. c. <u>Minor subdivision</u> : \$3,000.00 | \$ _____ |
| d. <u>(Preliminary) Major Subdivision</u> : \$5,000.00 | |
| <u>(Final) Major Subdivision</u> : \$1,500.00 | \$ _____ |
| | \$ _____ |

RESUBMISSIONS

- 5.. Submission of each revised plat including but not limited to: minor preliminary or final site plan, or subdivision, sketch plat, use variance plan or resubmission of revised plan in accordance with any conditions of any approval.

Total original escrow fee \$ _____ x 20% =

\$ _____

SPECIAL DESIGN ELEMENT

6. Original escrow fee \$ _____ x 33% =

\$ _____

TOTAL ORIGINAL ESCROW FEE DUE:

Original escrow fee submitted by applicant:

\$

Check #:

\$ _____

BALANCE of escrow fee still due:

\$ _____

EACH REVISED SUBMISSION ESCROW FEE DUE:

Revised submission escrow fee submitted by applicant:

\$

Check #

BALANCE of revised escrow fee still due:

\$ _____

Request for Taxpayer Identification Number and Certification

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

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

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. ☐ Individual/sole proprietor or single-member LLC ☐ 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. ☐ 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)

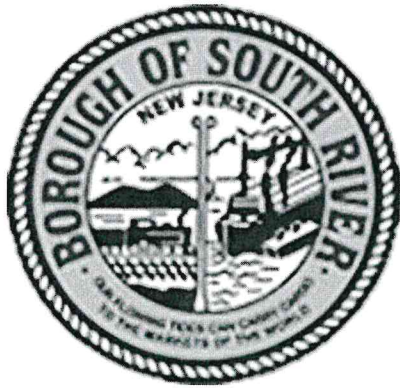
- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (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.

**BOROUGH OF SOUTH RIVER
MIDDLESEX COUNTY – STATE OF NEW JERSEY**

**PLANNING BOARD
ZONING BOARD OF ADJUSTMENT**



LEGAL NOTICE

Must be completed minimum business days prior to Public Hearing

48 WASHINGTON STREET * SOUTH RIVER, NJ 08882

P. (732) 257-1999 Ext. 516 * F. (732) 613-6105

www.southriversnj.org

LEGAL NOTICE

CHECK LIST

NOTICE MUST BE COMPLETED MINIMUM OF 10 BUSINESS DAYS PRIOR TO PUBLIC HEARING

Completed

- Submit Application for Variance to the Zoning Board of Adjustments– **15 copies** ☐
- Application, Escrow & Property List Fees must be submitted with Application ☐
- Denial of Zoning Application from the Zoning Dept. (if applicable) – **15 copies** ☐
- Property Taxes must be current ☐

PROCESSING OF APPLICATION

- 1) Application will be reviewed by the Board's Professionals & Construction Official ☐
- 2) You will receive the Professionals' report on your application ☐
- 3) You will receive a notice informing you of your Completeness Hearing Date ☐
- 4) You will attend your Completeness Hearing ☐
- 5) The Zoning Board will deem your application either complete or incomplete ☐
- 6) You will be notified of your Public Hearing Date at the Completeness Hearing ☐

NOTE: If your application is deemed incomplete, you will have to address concerns issued in the Professionals' report 10 days prior to your next Completeness hearing. You cannot proceed any further until all the Board & Professional's concerns are addressed.

LEGAL NOTICE INSTRUCTIONS

- 7) Once you are notified of your Public Hearing date, you will receive the 200' property list from the Borough ☐
- 8) You are obligated to notify all residents listed within 200' of the property by certified, return receipt (green post card) or by going door to door and having the resident sign the Acknowledgement Sheet. You must **also** publish the hearing date, time & location in the Homes News Tribune; *see attached detailed instructions*. **All notices must be done ten (10) business days prior to the meeting** ☐
- 9) You must submit to the Board's Secretary, seven (7) working days prior to the hearing, all certified receipts or acknowledgment sheet of residents noticed within 200' of the property & submit the **Affidavit of Publication** from the newspaper verifying that the Legal Notice was published. Please contact the Newspaper at 888-516-9220. *Newspaper submissions must be in word format.* ☐

PUBLIC HEARING

- 10) You or your legal representative must attend the Public Hearing ☐

RESOLUTION

- 11) Approximately thirty (30) days from the Public Hearing, your Resolution will be memorialized at the next scheduled Public Meeting ☐
- 12) The Resolution will be mailed to the applicant **contingent** that all escrow invoices are paid. ☐
- 13) If the Resolution has conditions & requires resubmission of drawings, be aware this must be done in order to obtain a permit. **NOTE: all resubmissions must be accompanied with resubmission fees as outlined on the Application & Escrow Fee sheets.** If payment does not accompany resubmission documents, reviews will be halted until such fees are submitted. ☐

Once the resubmission of drawings, documents and fees are received, review will begin by our Professionals, and if complete, a letter of final Compliance will be submitted to you, at which point you can request your required permit. ☐

NOTICE MUST BE COMPLETED MINIMUM 10 BUSINESS DAYS PRIOR TO PUBLIC HEARING



Application For Property Owners' List Within 200 Feet

As Provided by N.J.S.A. 40:55D-12c

Date Requested: _____

Name of Requester: _____

Requester's Address: _____

Telephone: _____ Email: _____

List of Property Owners within 200' of the following location:

List is valid for 6 months.

Address: _____

Block: _____ Lots: _____

Signature of Requester

Custodian of Record

Date: _____

Date: _____

Fee: \$10

Payable by cash or check made out to the Borough of South River

“SAMPLE”
200’ PROPERTY NOTICE

NOTICE MUST BE COMPLETED TEN (10) BUSINESS DAYS PRIOR TO PUBLIC HEARING

**NOTICE OF PUBLIC HEARING
TO PROPERTY OWNERS WITHIN 200’ OF PROPERTY**

RE: _____ (Name of applicant)

South River, NJ 08882

Block: _____ Lot: _____

TO WHOM IT MAY CONCERN,

In compliance with Section 50-32 of the Code of the Borough of South River, New Jersey, notice is hereby served upon you to the effect that I, _____ (*applicant's name*), have applied before the _____ Board for relief from the regulations of the zoning code to permit the following on the above referenced property:

HEARING DATE AND TIME

Any person or persons affected by this application may have an opportunity to be heard at the meeting to be held on _____, 20____ at 7:00PM in the Council Chambers of the Criminal Justice Building, located at 61 Main Street, South River, NJ, 08882.

YOUR RIGHT TO PUBLIC INSPECTION OF FILE

All Documents related to this applicant may be inspected by the public between the hours of 9:00AM to 4:00 PM, Monday-Friday, in the office of the Secretary of the Board, located at 48 Washington Street, South River, NJ, 08882.

Signature of Applicant

Date

NOTICE MUST BE COMPLETED MINIMUM 10 BUSINESS DAYS PRIOR TO PUBLIC HEARING

5265 2E9T 0000 09TE 0202

[illegible]

COMPLETE THIS SECTION ON DELIVERY	
A. Signature ☒ X	
☐ Agent ☐ Addressee	
B. Received by (Printed Name)	C. Date of Delivery
D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No	

PS Form 3811, July 2020 PSN 7530-02-000-9053

Domestic Return Receipt

OR
OBTAIN ACKNOWLEDGEMENT VIA
DOOR TO DOOR
(Please see the next page)

Must be completed minimum of ten (10) business days prior to the Public Hearing
Submit Proofs to Board Secretary seven (7) business days prior to the hearing

_____ (Application Property Address), South River, New Jersey

Block: _____ Lot: _____

Location: Criminal Justice Center, 61 Main Street, South River, NJ 08882

I, the undersigned, acknowledge receipt of a notice for public hearing on the variance application for the above reference property.

[illegible]

NOTICE MUST BE COMPLETED MINIMUM 10 BUSINESS DAYS PRIOR TO PUBLIC HEARING

“SAMPLE”
LEGAL NOTICE FOR NEWSPAPER
PLEASE SUBMIT IN WORD FORMAT

Legal Publication Notice must be published ten (10) business days prior to the meeting

Borough of South River
Planning & Zoning Board
Legal Notice

IN THE MATTER OF THE APPLICATION OF:

_____ (*Applicants' Name*)

_____ (*Property Address*) Block: _____ Lot: _____

NOTICE IS HEREBY GIVEN in compliance with the Zoning Ordinance of the Borough of South River, that an application from _____ (*applicant's name*), in regarding to _____ (*property address*) has been filed with the _____ (*state which board*) Board, Borough of South River, in the County of Middlesex, State of New Jersey, to request relief from the South River zoning code to permit the following:

The application has been place on the Board's calendars for public hearing date scheduled for: _____ (*hearing date*) beginning at 7 pm at the Borough of South River Criminal Justice Center located at 61 Main Street, South River, NJ at which time you may appear in person or by attorney and present any comments of objections you may have to the relief(s) sought.

The application & documents for which approval is sought are on file in the office of the Secretary for the Planning/Zoning Boards, located at 48 Washington Street, South River, NJ 08882 for public review between the hours of 9 am – 4 pm.

Date

Applicant's Signature

PLEASE SUBMIT IN WORD FORMAT TO:

Home News Tribune Classified Legal Advertisement

The Home News Tribute * PO Box 787, Neptune, NJ 07754

Tele: 888-516-9220 Fax: 888-516-9450 Email: HNTLegals@gannett.com

Legal Publication Notice must be published ten (10) business days prior to the meeting

NOTICE MUST BE COMPLETED MINIMUM 10 BUSINESS DAYS PRIOR TO PUBLIC HEARING

04042024