FORM P.B. #1 PLANNING BOARD OF THE BOROUGH OF KINNELON To Be Filed In Duplicate With Secretary Of Planning Board At Borough Clerk's Office

| APPLICATION NO. | FILED | |
|---------------------------------------|--|----------------|
| , <u></u> | | Secretary |
| | (Do not write abov | e this line.) |
| TO: PLANNING BOARD Application is he | ICATION FOR CLASSIFICATION OOF THE BOROUGH OF KINNELON Preby made for the classification In more particularly described. | |
| 1. Applicant's name | | Phone |
| | | |
| Name | | above) |
| 3. Interest of Applicant i | f other than owner | |
| 4. Location of subdivisio | n(Neighborhood or section) | (Street) |
| (Tax Map I | Block) | (Tax Map Lots) |
| 5. Number of proposed | lots | |
| 6. Area of entire tract | Portion be | ing subdivided |
| | | |
| Name | erson preparing Sketch Plat | Phone |
| Signature of Applicant_ | | |
| Date received & fee col | lected by Borough Clerk Date | Fee |
| | | Borough Clerk |

To Be Filed In Duplicate With Municipal Clerk

| FORM P.B. #2 | Planning Board | Borough of Kinnelon |
|---|--|-------------------------------------|
| Application No | Filed | |
| | (Do not write above this line) | |
| APPLICATION for Tentative A | Approval of Preliminary Subdivision Plat. | |
| TO: Planning Board, Borougl | h of Kinnelon | |
| | and for the tentative approval of the | Preliminary Plat of a major |
| Application is herby subdivision hereinafter part | made for the tentative approval of the icularly described: | r temminary r lac or a major |
| 1. Applicant's name | | |
| Address | | |
| Phone | | |
| 2 Name and address of Pre | sent Owner if other than above: | |
| | | |
| | | |
| 3. Interest of Applicant if ot | her than owner: | |
| | | |
| 4. Date classified as Major S | Subdivision by Subdivision Committee of | Planning board |
| 5. Location of Subdivision | | |
| | Block Number | er |
| C. M In the second lots | | |
| 6. Number of proposed lots | | |
| 7. Area of Entire Tract | | |
| Area of portion being sub | odivided | |
| L | | |
| Development Plans:(a) Sell Lots only (Yes or N | va) | |
| | Sale(Yes or No) | |
| | | |
| 9. Deedrestrictions that app Copy) | ply or are contemplated. (If no restrictio | ns, state "None"; if "Yes" attach a |
| | and a desired and income plate | |
| | person designing preliminary plat: | |
| | | |
| | | |
| 11. List proposed improven | ments & utilities to install or post perfor | mance guarantee prior to final |
| approval: | | |
| Improve | ement | Intention |
| 1. | | |
| 2. | | |
| 3. 4 | | |
| 4 | | |

5.

| 12. List of maps & other mater | | n & number of each: Number |
|--------------------------------|---------------------|-------------------------------|
| a. | | |
| b. | | |
| c. | | |
| e. | | |
| Signature of Applicant | | |
| | (Do not write below | this line) |
| Date received and fee collecte | ed by Borough Clerk | |
| Date | | Fee |
| | Borough Cle | rk |
| Action of the | | Planning Board |
| Date | Approved | Disapproved |
| | | |
| | | Chairman |
| | | Secretary |

To Be Filed In Duplicate With Municipal Clerk

| FORM P.B. #3 | Planning Board | Borough of Kinnelon |
|--|---|----------------------------------|
| Application No | Filed | Date |
| | (Do not write above this line) | |
| APPLICATION | ON FOR FINAL APPROVEL OF FINAL SU | JBDIVISION PLAT |
| To: Planning Board, Borough | of Kinnelon | |
| | made for final approval of a Final Plat o | of a proposed subdivision all as |
| shown and described on the a | ccompanying maps and documents. | |
| 1. Applicant's name | | |
| Address | | |
| Phone | | |
| 2. Name and address of preser | nt owner (if other than above) | |
| | · | |
| Address | | |
| | of Preliminary Plat | |
| 4. Form #2 application number | r | e: |
| 5. Does the final plat follow ex If not, indicate material char | actly the Preliminary Plat in regard to o | details & area covered? |
| 6. Number of lots proposed for | r Final Approval | |
| 7. List of mans & other materia | al accompanying application & number | of each |
| Item | | mber |
| 3. | ,,,,, | |
|). | | |
| • | | |
| l. | | |
| 2. | | |
| - | | |
| 5. | | |
| 1. | | |
| ignature of Applicant | | |
| | (Do not write below this line) | |
| Date received by Municipal Cle | erk | |
| | | Signature |
| Approved (Yes or No) | Date | |
| xtension of time limit for Fina | Approval agreed to by applicant | |
| (Yes or No) | Date | |

APPLICATION FOR SITE PLAN APPROVAL BOROUGH OF KINNELON PLANNING BOARD

| APPLICATION NO. | FEE PAID |
|--|---|
| SETS OF PRINTS SUBMITTED | DATE FILED |
| | |
| | Donat Clad |
| t | Borough Clerk |
| | |
| | 90, ARTICLE IV A. CONSULT WITH BOROUGH ENGINEER. S TO BE COMPLETED AND INDICATE IF NOT APPLICABLE. |
| OMITE A DE LO OF THINK TO REQUIRED. THE FIELD | 3 TO BE CONTRICTED AND INDICATE IT NOT ALTERCABLE. |
| 1. APPLICANT | |
| Mailing | |
| Address | |
| | Phone |
| 2 PROPERTY OWNER OF RECORD ON EHING O | DATE |
| Mailing | /// L |
| Address | |
| | Phone |
| If a the with a security of CONSTUDE OF CONST | |
| if other than applicant, SigNATURE OF CONSE | NT: |
| 3. Deed restrictions that apply or are contemp | plated |
| If no restrictions, state NONE, if YES attach of | |
| | |
| 4. DRAWINGS PREPARED BY | |
| N.J License | d Professional Engineer |
| | |
| Address | |
| | Phone |
| E LICT OF MADE AND OTHER MATERIAL ACCO | LADARWING ADDUCATION AND MUNACED OF THE |
| A) Site Plan Drawing | MPANYING APPLICATION AND NUMBER OF EACH. |
| B) Soil Erosion & Sediment Control Plan | |
| C) Tree Removal Plan | |
| D) Landscape Plan | |
| E) Environmental Assessment | - And the second |
| F) Stream & Water Courses to be Altered | |
| • | And the state of the second and the |
| G) | |
| H) | |
| 1) | 4-100 (2) (4-1) (4- |
| 6. LOCATION OF SITE PLAN: Street Name | |
| Nearest Intersection | |
| Tax Map Sheet No. Block No. | Lot No |
| 7 DI IRDOSE DE RI III DINIG: | |
| | |
| Any smoke, abnormal noise or odors involve | -d? |
| 7. PURPOSE OF BUILDING: Present Location | |

Days & Hours of Operation

| 11. DRIVEWAY WIDTH: If located on County Road or State Highway, a permit from proper agency must be obtained in order to open driveway. County permit issued only after Morris County Planning Board approval granted. |
|--|
| 12. DRAINANGE FACIILITIES: Existing To Be Installed Does plan clearly show existing & proposed? |
| 13. SANITARY SEWAGE DISPOSAL: If existing, agreement with Governing Body is necessary to hook-up. If none exist, Board of Health must approve percolation test & design. SUBMITTED TO DATE |
| 14. HAS FIRE PREVENTION BUREAU BEEN CONSULTED? |
| 15. HAS TRAFFIC CONTROL BUREAU BEEN CONSULTED? |
| 16. SIGNS: On proposed building? Free-standing? Do Signs conform to Code? |
| 17. BOARD OF ADJUSTMENT APPROVAL REQUIRED OF BUSINESS USE? |
| 18. Will the proposed Site Plan conform to the Zoning Ordinance of the Borough? |
| 19. PUBLIC HEARING: Date Set for Confirm with Planning Board Secretary |
| Applicant must serve at least ten (10) days' notice to all property owners within 200 feet by certified mail or personal service. Affidavit of such service required. Bring receipts from certified mail to hearing. |
| 20. LIST PROPOSED IMPROVEMENTS & UTILITIES & INTENTIONS TO INSTALL OR POST PERFORMANCE GUARANTEE PRIOR TO FINAL APPROVAL. |
| Improvement Intention A) B) C) D) E) |
| 21. AGREEMENT with GOVERNING BODY necessary for posting of PERFORMANCE BOND. Date Submitted: |
| SIGNATURE OF APPLICANT |
| PLANNING BOARD RECOMMENDATION: MEETING DATE: |

Approval





Phone: 973-838-5401

Extension 1 Fax: 973-838-1862

NEW ACCOUNT ESCROW INFORMATION SHEET

BOROUGH CLERK

| ESCROW REQUIRED FOR: (CIRCLE C | | QUIRED FOR: (CIRCLE ONE) | PLANNING BRD | BRD OF ADJUSTMENT | SOIL REMOVAL |
|--------------------------------|-----|--------------------------|--------------|-------------------|---|
| | | | | | |
| DATE:_ | | | ļ | APPLICATION#: | |
| | | | | | |
| | 1. | Applicant Name: | wr | | |
| | 2. | Applicant Date of Birth: | | | 100 |
| | 3. | Mailing Address: | | | |
| | | | | | |
| | 4. | Block: | | | |
| | 5. | Lot: | _ | | |
| | 6. | Daytime Phone# | | | |
| | 7. | Cell Phone # | | | |
| | 8. | Property Address: | | | |
| | 9. | Escrow Amount: | | | |
| | 10. | E-mail Address: | | | AND THE RESERVE OF THE PERSON |

Form W-9 (Rev. March 1994)

Department of the Treasury

Request for Taxpayer Identification Number and Certification

Give form to the requester. Do NOT send to the IRS.

Internal Revenue Service Name (If joint names, list first and circle the name of the person or entity whose number you enter in Part I below. See instructions on page 2 if your name has changed.) type Business name (Sole proprietors see instructions on page 2.) 9 print Other > Individual/Sole proprietor Corporation Partnership Please check appropriate box: Requester's name and address (optional) Address (number, street, and apt. or suite no.) City, state, and ZIP code Taxpayer Identification Number (TIN) List account number(s) here (optional) Part I Enter your TIN in the appropriate box. For individuals, this is your social security number Social security number (SSN). For sole proprietors, see the instructions on page 2. For other entities, it is your employer Part II For Payees Exempt From Backup identification number (EIN). If you do not have a OR Withholding (See Part II number, see How To Get a TIN below. instructions on page 2) Employer identification number Note: If the account is in more than one name, see the chart on page 2 for guidelines on whose number to enter.

Part III 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 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.

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 of underreporting interest or dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, the 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. (Also see Part III instructions on page 2.)

Sign Here

Signature >

Date >

Section references are to the Internal Revenue Code.

Purpose of Form.—A person who is required to file an information return with the IRS must get your correct TIN to report income paid to you, real estate transactions, mortgage interest you paid, the acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA. Use Form W-9 to give your correct TIN to the requester (the person requesting your TIN) and, when applicable, (1) to certify the TIN you are giving is correct (or you are waiting for a number to be issued), (2) to certify you are not subject to backup withholding, or (3) to claim exemption from backup withholding if you are an exempt payee. Giving your correct TIN and making the appropriate certifications will prevent certain payments from being subject to backup withholding.

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

What Is Backup. Withholding?—Persons making certain payments to you must withhold and pay to the IRS 31% of such

payments under certain conditions. This is called "backup withholding." Payments that could be subject to backup withholding include interest, dividends, broker and barter exchange transactions, rents, royalties, nonemployee pay, and certain payments from fishing boat operators. Real estate transactions are not subject to backup withholding.

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

- 1. You do not furnish your TIN to the requester, or
- 2. The IRS tells the requester that you furnished an incorrect TIN, or
- 3. 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
- 4. You do not certify to the requester that you are not subject to backup withholding under 3 above (for reportable

interest and dividend accounts opened after 1983 only), or

5. You do not certify your TIN. See the Part III instructions for exceptions.

Certain payees and payments are exempt from backup withholding and information reporting. See the Part II instructions and the separate Instructions for the Requester of Form W-9.

How To Get a TIN.—If you do not have a TIN, apply for one immediately. To apply, get Form SS-5, Application for a Social Security Number Card (for individuals), from your local office of the Social Security Administration, or Form SS-4, Application for Employer Identification Number (for businesses and all other entities), from your local IRS office.

MORRIS COUNTY PLANNING BOARD INSTRUCTIONS TO LAND DEVELOPMENT APPLICANTS SUBMISSION AND APPROVAL PROCEDURES



| ee application form on reverse s | ide) |
|----------------------------------|--|
| | SUBDIVISION – All subdivisions (both major and minor) must be submitted to the County Planning Board. |
| | APPROVAL REQUIRED - All major subdivisions will be reviewed for approval. |
| SÜBMISSION | Minor subdivisions will receive an administrative review to determine: 1. If the minor subdivision fronts along a county road; and 2. If it affects county drainage facilities. |
| REQUIREMENTS & COUNTY | Those minor subdivisions which meet either one or both of the above criteria will be reviewed for approval. All other minor subdivision will be reviewed and exempted. |
| APPROVAL | SITE PLANS - All site plans which meet either one or both of the following criteria must be submitted to the County Planning Board: 1. Fronts along a county road 2. The proposed impervious surface area equals or exceeds 43,560 square feet (one acre). |
| | APPROVAL REQUIRED – Site plans meeting any one or both of the above stated criteria will be reviewed for approval. All other site plans will be reviewed and exempted. |
| REVISIONS | Subdivision plats and site plans which are revised to comply with County Planning Board requirements, or would alter a previous County Planning Board approval, must be resubmitted to the County Planning Board for review and approval. |
| PROCEDURES | New applications must be submitted to the County Planning Board by the municipal approving authority or by the applicant and, accompanied by a transmittal letter from the municipal approving authority. Development applications revised in response to County Planning Board requirements may be submitted directly to the County Planning Board by the applicant. |
| REPORTS | The County Planning Board has a statutory review period of thirty (30) days from the date of a complete submission. Upon completion of the County Planning Board review a report will be mailed to the municipal approving authority with copies mailed to the applicant and his engineer. For those site plans and minor subdivisions found to be exempt, a notice of exemption will be mailed to the municipal approving authority. |
| year and the state of the second | A complete application consists of the following: |
| SUBMISSION PACKAGE | Two (2) completed copies of the county application form: Two (2) copies of the subdivision or site plan drawings; Two (2) copies of the drainage study; if required by the County Land Development Standards or municipal ordinance; Two (2) copies of the traffic impact study, if required by the County Standards or municipal ordinance; and, Payment of the review fee in accordance with the review fee schedule printed on the reverse side of this application. If the review fee is not received with this application, the County Planning Board will bill the applicant directly. |
| | NOTE: Review fee not required for revised submission. |
| | Morris County Planning Board P.O. Box 900 Morristown, NI 07963-0900 Phone: 973-829-8120 Located at: Fax: 973-326-9025 30 Schuyler Place, 4th Floor Morristown, NI 07960 |

MORRIS COUNTY PLANNING BOARD LAND DEVELOPMENT REVIEW ... APPLICATION

Print Name

P.O. Box 900, Morristown, NJ 07963-0900

Office Located at: 30 Schuyler Place, 4th Floor Morristown, NJ 07960



To be filed in duplicate with all new submissions (see instructions on other side) Section I: Submission Requirements Check Appropriate Boxes Planning Board; or New submission; or Review fee enclosed Board of Adjustment Revised submission (No review fee) 2 copies of drawings, related studies, and this application enclosed. Section II: Project Information _____ Lots (s) ___ Project Name: ______ Block (s)___ Location: Municipality: Road Frontage: Applicant's Name: Phone: Fax: Mailing Address: Section III: Site Data What is being proposed? Zone District (s) in which property is located: Proposed Use (s) Present Use (s) Proposed Water Source: Sewage Disposal Check One Box Only and Complete: Subdivision: Gross Area of Subdivision Tract_____ Number of Lots _____ Net Lot Area Acres Site Plan: Lot Area Acres If Non-Residential: New Floor Area If Residential: Number of New Parking Spaces · Number of Dwelling Units_____ Proposed Impervious Surface Review Fees Section IV: not required for revised submissions Applicant hereby applies for (check one): Municipal Classification Rate Subdivision: Minor \$50.00 Subdivision: Sketch no charge Subdivision: Preliminary \$125.00 + \$10.00/lot (not to exceed \$1, 000.00) \$__ Subdivision: Final no charge Site Plan: Multi-Family \$125.00 + \$5.00 / dwelling unit (not to exceed \$2,000.00) \$ ----Site Plan Non-Residential \$125.00 + \$3.00 / parking space (not to exceed \$3,000.00) \$ ---Amount Enclosed \$___ Please make check payable to "Treasurer of Morris County" Application filled out by:

Signature



Tax Collector



130 Kinnelon Road Kinnelon, New Jersey 07405

TAX COLLECTOR

973-838-5401 Extension 2 Fax: 973-838-4832 www.kinnelonboro.org

| Date: |
|--|
| TO: PLANNING BOARD |
| NAME: |
| PROPERTY LOCATION: |
| BLOCK: |
| LOT: |
| APPLICATION # |
| Please accept this letter as verification of real estate taxes paid for the purpose of a variance application made to the Kinnelon Board of Adjustment under the Municipal Land Use Law on the above referenced property located in the Borough of Kinnelon. |
| () There are no delinquent taxes |
| () Taxes are delinquent in the amount of \$ |
| |
| Very truly yours, |
| Judy O'Brien |

APPLICANT PLEASE NOTE:

- 1. This notice must be served by certified mail, or personal service, ten (10) days prior to the scheduled public hearing.
- 2. Contact Tax Assessors Office for the list of property owners to be served.
- 3. Public notice must also be given by publication in the official newspaper of Kinnelon ten (10) days prior to the public hearing. Affidavit of Publication must be filed with the Planning Board.
- 4. Affidavit of Notice must be filed with the Planning Board.
- 5. Public hearing cannot be scheduled until application has been deemed COMPLETE by the Planning Board or its Administrative Officer.