

TOWNSHIP OF BRIDGEWATER
SOMERSET COUNTY, NEW JERSEY

FORM # 3H

Application #: _____

Board File Name: _____

Date Filed: _____

(Do not write above this line)

APPLICATION: SITE PLAN

(Solar/Photovoltaic Facilities)

Please check type of application:

- _____ Conceptual Site Plan _____ Conditional Use Approval _____ Minor Site Plan
- _____ Preliminary Major Site Plan _____ Final Major Site Plan _____ C-Variances
- _____ Amend prior approval for Preliminary Site Plan. Date of prior approval (attach copy) _____
- _____ Amend prior approval for Final Site Plan. Date of prior approval (attach copy) _____

Does this application constitute a new application? _____

If not, please attach 24 copies of Site Plan previously submitted with resolution.

1. Applicant's name _____ Phone _____ Fax _____
 Address (mailing) _____ Email: _____

2. Owner's name _____ Phone _____ Fax _____
 Address (mailing) _____

3. Attorney's name _____ Phone _____ Fax _____
 Address (mailing) _____ Email: _____

4. Engineer's name _____ Phone _____ Fax _____
 Address (mailing) _____ Email: _____

5. Name of Development _____
 Block(s) _____ Lot(s) _____ Tax Sheet _____

6. Street on which property lies including location of nearest intersection

7. Present use _____

8. Proposed Use _____

9. Zoning District _____

10. Area in acres of any additional adjoining land owned by owner or applicant

11. Amount of lot area with slopes 30 percent or greater _____

Slopes 20-29 percent _____ Slopes 11-19 percent _____

Slopes 0-10 percent _____

12. Total land available for development (126-266) _____

13. Amount of lot area in floodway _____; flood fringe _____; wetlands _____

14. Waivers requested from the following sections of the Township Land Use Code,

Chapter 126 _____

15. List all plans, exhibits, documents, reports, significant letters, and written decisions from other governmental agencies which constitute this application. Please indicate the title of plan or document scale, number of sheets, date of preparation and name and license number of preparer if appropriate.

NOTE: ALL EXHIBITS PRESENTED AND MARKED AT THE HEARING MUST BE CLIPPED (NOT MOUNTED WITH ADHESIVE) TO THE FOAM BOARD.

All exhibits will be kept in the application file and the foam boards will be returned at the meeting.

X _____

Signature of person preparing application

Date

THE TOWNSHIP OF BRIDGEWATER
GROUND MOUNTED SOLAR/PHOTOVOLTAIC FACILITIES
CHECKLIST

Application #: _____ Applicant: _____

Block(S) _____ Lot(S) _____

Applicant	Bridgewater

1. **Twenty four (24) copies** of the application form, checklist, fee schedule with calculations, survey and Plat.
All documents submitted must be collated into 24-sets
 (or you may select the following option)
2. **OPTION:** You may choose to submit (3) full sets of documents for completeness review only. When the documents submitted comply with the submission requirements, we will notify you to submit the other (21) sets in order to be deemed complete. This option is made available to applicants in an effort to save resources expended on numerous plans that may need to be revised and resubmitted.
3. All fees must be paid.
 Application fee: _____ Escrow Fee: _____
 (Fee Schedule with calculations must be submitted, including a signed W-9)
4. If the application involves a request for a *subdivision or site plan* including land development of more than 50 dwelling units or 50,000 square feet of non-residential building space or all major subdivisions or site plans within 500 feet of a municipal border or critical natural resources like primary or secondary streams identified in the County Open Space Plan, that may affect neighboring jurisdictions, ***you must submit a copy of the full application packet including plans to Somerville Borough and Raritan Borough and provide proof of submission/ mailing.***
5. Size of Map should be in accordance with the Map Filing Laws
6. Survey of property, signed and sealed by a Licensed Surveyor
7. Submit deeds for property, including easement deeds
8. Signed Consent by owner form even if the applicant is the owner

if the applicant is the owner

SITE PLAN SHALL CONTAIN THE FOLLOWING DATA:

1. A Key map of the site with reference to surrounding areas, zoning district(s) and existing street locations within 200' of property. Scale not less than 1"=800' (126-153A)
2. The North arrow, scale, block, lot, name and address of the owners of all contiguous land and of property directly across the street, and downstream 200 feet of the property, as shown by the most recent tax records of all municipalities in which such properties shall lie. (126-153B)
3. Lot line dimensions, bearings and distances (126-153C)
4. Location of all buildings and structures, streets, easements, driveways, entrances and exits on the site and within 200 ft thereof. (126-153D)
Structures to be removed should be indicated by dashed lines
5. Right-of-way width of existing road from the centerline. Pavement width measurements.
6. Location and dimensions of proposed buildings, structures, roads, driveways, parking areas with dimensions of each (126-153E)
7. Zoning Chart listing required, existing and proposed setbacks, height, lot area, improved lot coverage, and all information included in the schedule of land and area requirements. Graphic depiction is required.
8. Proposed building height setbacks, front, side and rear yard distances and required setbacks (126-153F). Buildings must identify square footage on each building for each floor
9. All existing physical features on the site and within 200 feet thereof, including streams, water courses, existing woodlands, and significant soil and hydrological conditions such as swamp, rock and water flows (126-153G). All existing trees as follows:
Deciduous 12" dbh or greater; Non-Deciduous 8" dbh or greater;
Dogwoods 4" dbh or greater
10. Topography showing existing and proposed contours at two foot intervals extending 200 feet off site. A reference bench mark shall be clearly designated (126-153H)
11. Parking and loading areas shall be indicated with dimensions for bays, aisles, stalls, curb radii, traffic islands and channelization. Indicate direction of traffic flow and sight easements, number of employees, total and maximum in one shift, proposed and required parking spaces. No driveway within ten (10) feet of property lines (126-153I)
12. Architectural building elevations including facade signs and entrances, materials, dimensions and height.
13. Improvements such as roads, curbs, bumpers and sidewalks shall be indicated with cross sections, design details and dimensions (126-153J).

FORM # 1

BRIDGEWATER TOWNSHIP

CONSENT BY OWNER

I, _____, am the owner of the property known as Block (s) _____, Lot (s) _____ as shown on the Tax Map of Bridgewater Township. I am aware of the application that is to be filed with the Planning Board or Zoning Board of Adjustment in Bridgewater Township and I consent to said application. I permit the Board, its staff or other designated officials to enter onto the property which is the subject of this application and review existing and proposed site and development elements.

I further understand that there are fees that must be paid in accordance with said application. In the event that the applicant does not pay all of the appropriate fees including application and escrow fees as required for this application, I consent to have any unpaid balance placed as an added assessment against my property to be collected by the Tax Collector's office in due course.

(This form must be signed and notarized, even if the applicant is the owner)

Signature of Owner

Date: _____

Sworn to and subscribed before me
this _____ day of _____ 200__.

Notary Public

FORM # 2

**DISCLOSURE STATEMENT FOR CORPORATIONS AND PARTNERSHIPS
APPLYING FOR SITE PLAN AND SUBDIVISION APPROVAL**

CORPORATIONS:

Please indicate the following with respect to the Corporation:

NAME _____

ADDRESS OF PRINCIPAL OFFICE _____

REGISTERED AGENT: NAME _____

ADDRESS _____

STATE OF INCORPORATION _____

If other than New Jersey, is Corporation authorized to do business in New Jersey? _____

If so, when was authorization obtained? _____

List all stockholders controlling 10% or greater of stock: _____

PARTNERSHIPS:

Please indicate the following with respect to the partnership:

TRADE NAME _____

ADDRESS OF PRINCIPAL OFFICE _____

NAMES AND ADDRESSES OF PARTNERS _____

VARIANCE AND DESIGN WAIVER REPORT

(SUBMIT WITH ALL APPLICATIONS)

FORM # 4

APPLICANT NAME _____ DATE _____

ADDRESS _____

PHONE #: _____ FAX #: _____

LOT(S) _____ BLOCK(S) _____

CURRENT ZONING DISTRICT _____

TOTAL SQUARE FEET OF ALL STRUCTURES _____ s.f.

	Ordinance Requirement	Existing	Propose	Variance Y or N
Improved Lot Coverage (all improvements)	_____ %	_____ %	_____ %	_____
Floor Area Ratio (F.A.R.)	_____	_____	_____	_____
Lot Area	_____	_____	_____	_____
Lot Width	_____	_____	_____	_____
Side Yard (one)	_____	_____	_____	_____
Side Yard (total of both)	_____	_____	_____	_____
Front Yard	_____	_____	_____	_____
Rear Yard	_____	_____	_____	_____
Building height and number of stories	_____	_____	_____	_____
Parking	_____	_____	_____	_____
ACCESSORY STRUCTURES				
Side yard	_____	_____	_____	_____
Rear yard	_____	_____	_____	_____
LIST OTHER VARIANCES (type)				
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
LIST ALL DESIGN WAIVERS				

RECOMMENDATION:

Attach letters and other supporting documentation that applicant attempted to purchase adjacent land to make lot conforming.

Provide evidence that Variance will not be detrimental to the neighborhood and adjacent residences such as documentation that variance conforms to existing conditions in the area

BRIDGEWATER FEE SCHEDULE - SUBDIVISION

	Application Charge	Application Fee	Escrow Fee	Escrow Fee	Escrow Subtotal
CONCEPT SKETCH					
<input type="checkbox"/> A Five Lots or More	\$100.00	\$	\$3,000.00	\$	\$
<input type="checkbox"/> B Less than Five Lots	\$100.00	\$	\$1,500.00	\$	\$
MINOR SUBDIVISION					
<input type="checkbox"/> A Minor Subdivision	\$125.00	\$	\$3,000.00	\$	\$
<input type="checkbox"/> B Lot Line Adjustment (No Variances)	\$50.00	\$	\$1,000.00	\$	\$
<input type="checkbox"/> PRELIMINARY MAJOR SUBDIVISION	\$110/ Lot	\$	\$5000 + \$500/ Lot	\$	\$
<input type="checkbox"/> FINAL MAJOR SUBDIVISION	\$55/ Lot	\$	\$5000 + \$500/ Lot	\$	\$
VARIANCES - EACH variance shall be computed.					
<input type="checkbox"/> A Appeals (NJSA 40:55D-70a)	\$100.00	X	\$1,500.00	X	\$
<input type="checkbox"/> B Interpretation (NJSA 40:55D-70b)	\$100.00	X	\$1,500.00	X	\$
<input type="checkbox"/> C Hardship/Bulk (NJSA 40:55D-70c)	\$250.00	X	\$3,000.00	X	\$
<input type="checkbox"/> D Use (NJSA 40:55D-70d)	\$250.00	X	\$3,000.00	X	\$
<input type="checkbox"/> E Permit (40:55D-34&35)	\$100.00	X	\$1,000.00	X	\$
<input type="checkbox"/> AMENDED SUBDIVISION PLAN OR EXTENSION OF APPROVAL	50% of initial Fee	\$	50% of initial Escrow	\$	\$
	Total for Application Fee	\$	Total Escrow	\$	\$

Payment is to be made in TWO checks. One check is to be identified as the APPLICATION FEE and the second check is to be identified as ESCROW ACCOUNT (must attach completed W-9 form)

BRIDGEWATER FEE SCHEDULE - SITE PLAN

	Application Charge	Application Fee Subtotal	Escrow Fee	Escrow Fee Subtotal
SITE PLAN - CONCEPT				
<input type="checkbox"/> A Minor Plan	\$100.00	\$ _____	\$1,000.00	\$ _____
<input type="checkbox"/> B Major Plan	\$100.00	\$ _____	\$1,000.00	\$ _____
<input type="checkbox"/> C Multifamily site	\$100/ acre + 10/ Unit (Minimum Deposit = \$500)	\$ _____	\$250/ acre + \$50/ Unit (Minimum Deposit = \$1500.00)	\$ _____
<input type="checkbox"/> D Site Plan Waiver	\$25.00	\$ _____	\$500.00	\$ _____
MINOR SITE PLAN				
<input type="checkbox"/>	\$250.00	\$ _____	\$2,500.00	\$ _____
PRELIMINARY SITE PLAN - NON-RESIDENTIAL (A+B+C)				
<input type="checkbox"/> A Basic Fee, PLUS B+C	\$250.00	\$ _____	\$5,000.00	\$ _____
<input type="checkbox"/> B For All Structures: + C	\$500.00 plus	\$ _____	\$ 2000 plus	\$ _____
<input type="checkbox"/> The first 5000 s.f	\$0.06/ s.f plus	\$ _____	\$0.20 s.f plus	\$ _____
<input type="checkbox"/> Remaining over 5000 s.f	\$100/ acre	\$ _____	\$50/acre	\$ _____
<input type="checkbox"/> C Acreage of lot (or part thereof)				
FINAL SITE PLAN - NON-RESIDENTIAL (A+B+C)				
<input type="checkbox"/> A Basic Fee, plus B plus C	\$250.00	\$ _____	\$5,000.00	\$ _____
<input type="checkbox"/> B For All Structures: + C	\$500 plus	\$ _____	\$2000.00 plus	\$ _____
<input type="checkbox"/> The first 5000 s.f	\$0.06 s.f. plus	\$ _____	\$0.20 s.f. plus	\$ _____
<input type="checkbox"/> Remaining over 5000 s.f	\$100/ acre	\$ _____	\$50/ acre	\$ _____
<input type="checkbox"/> C Acreage of lot (or part thereof)				
PRELIMINARY SITE PLAN - RESIDENTIAL (A+B)				
<input type="checkbox"/> A Basic Fee, PLUS B	\$125.00	\$ _____	\$5000.00 plus	\$ _____
<input type="checkbox"/> B Building Site Plan	\$50.00	\$ _____	\$500/ unit	\$ _____
FINAL SITE PLAN- RESIDENTIAL (A+B)				
<input type="checkbox"/> A Basic Fee, plus B	\$250, plus	\$ _____	\$5000.00 plus	\$ _____
<input type="checkbox"/> B Building Site Plan	\$50/ unit	\$ _____	\$500/ unit	\$ _____

CONTINUE CALCULATIONS ON PAGE 2 OF 2

BRIDGEWATER FEE SCHEDULE - SITE PLAN

VARIANCES - Each variance shall be computed.

	Application Charge	Application Fee	Escrow Fee	Escrow Fee	Escrow Subtotal
<input type="checkbox"/> A	\$100.00	\$	X	\$1,500.00	X
<input type="checkbox"/> B	\$100.00	\$	X	\$1,500.00	X
<input type="checkbox"/> C	\$250.00	\$	X	\$3,000.00	X
<input type="checkbox"/> D	\$250.00	\$	X	\$3,000.00	X
<input type="checkbox"/> E	\$100.00	\$	X	\$1,000.00	X

AMENDED SITE PLAN
OR EXTENSION OF APPROVAL

50% of initial Fee \$ _____
50% of initial Escrow \$ _____

Total Application Fee \$ _____ **Total Escrow** \$ _____

Payment is to be made in TWO checks. One check is to be identified as the APPLICATION FEE and the second check is to be identified as ESCROW ACCOUNT (must attach completed W-9 form)

BRIDGEWATER FEE SCHEDULE - VARIANCE, APPEALS, CONDITIONAL USE

	Application Charge	Application Fee	Escrow Fee	Escrow Subtotal
<input type="checkbox"/> A Appeals (NJSA 40:55D-70a)	\$100.00	\$	\$1,500.00	\$
<input type="checkbox"/> B Interpretation (NJSA 40:55D-70b)	\$100.00	\$	\$1,500.00	\$
<input type="checkbox"/> C Hardship/Bulk (NJSA 40:55D-70c)	\$250.00	\$	\$3,000.00	\$
<input type="checkbox"/> D Use (NJSA 40:55D-70d)	\$250.00	\$	\$3,000.00	\$
<input type="checkbox"/> E Permit (40:55D-34&35)	\$100.00	\$	\$1,000.00	\$
<input type="checkbox"/> F SIMPLE VARIANCE	\$75.00	\$	\$350.00	\$

VARIANCES - Each variance shall be computed.

- Single & Two-Family Residences ONLY:
- Addition/Alteration not to exceed 500 square feet:
- For buildings, fence, shed, swimming pool and deck.

APPEAL TO TOWNSHIP COUNCIL \$250.00 \$ None

CONDITIONAL USE

Determine whether to authorize a Conditional use shall be made by the Planning Board

\$350.00	\$	\$1,500.00	\$
Total for Application Fee	\$	Total Escrow	\$

Payment is to be made in TWO checks. One check is to be identified as the APPLICATION FEE and the second check is to be identified as ESCROW ACCOUNT (must attach completed W-9 form)

Request for Taxpayer Identification Number and Certification

**Give form to the
 requester. Do not
 send to the IRS.**

Print or type
 See Specific Instructions on page 2.

Name (as reported on your income tax return)	
Business name, if different from above	
Check appropriate box: <input type="checkbox"/> Individual/ Sole proprietor <input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Other ▶	<input type="checkbox"/> Exempt from backup withholding
Address (number, street, and apt. or suite no.)	Requester's name and address (optional)
City, state, and ZIP code	
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 your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Social security number								
or								
Employer identification number								

Note. If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.

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. person (including a U.S. resident alien).

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 on page 4.)

Sign Here

Signature of
 U.S. person ▶

Date ▶

Purpose of Form

A person who is required to file an information return with the IRS, must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

U.S. person. Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

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.

Note. If 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.

For federal tax purposes you are considered a person if you are:

- an individual who is a citizen or resident of the United States,
- a partnership, corporation, company, or association created or organized in the United States or under the laws of the United States, or

- any estate (other than a foreign estate) or trust. See Regulation section 301.7701-6(a) for additional information.

Foreign person. If you are a foreign person, use the appropriate Form W-8 (see Publication 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 recipient 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 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.

REQUEST FOR 200' RADIUS LIST OF CERTIFIED PROPERTY OWNERS

(APPLICANT TO SUBMIT COMPLETED FORM WITH FEE TO THE TAX ASSESSOR)

DATE _____ BLOCK(S) _____ LOT(S) _____

PROPERTY LOCATION _____

APPLICANT _____

PLEASE MAIL TO _____

TELEPHONE # _____

PAID CHECK # _____ CASH \$ _____

Tax Assessor's Note: The Charge for this list is \$10.00 for forty (40) or less properties printed. Each property in excess of forty (40) names has an additional .25-cent charge. In addition, as per Section 94 of the Code of Bridgewater Township, the Township may charge an additional \$35.00 per hour for the cost of preparing a list of certified property owners.

Mail or deliver this request to:

**Tax Assessor's Office
Bridgewater, Township
100 Commons Way
Bridgewater, NJ 08807**

SAMPLE FORM OF NOTICE OF PUBLICATION TO BE PUBLISHED IN THE OFFICIAL NEWSPAPER OF THE TOWNSHIP (Courier News) AT LEAST 10-DAYS PRIOR TO THE HEARING DATE

**BRIDGEWATER TOWNSHIP
NOTICE OF HEARING**

TAKE NOTICE, that on _____ (date of public hearing) at _____ (time) P.M. a public hearing will be held before the Bridgewater Township _____ (Planning or Zoning) Board at the Bridgewater Municipal Courtroom, 100 Commons Way, Bridgewater, New Jersey to consider the application of _____ (applicant's name) for the following:

1. (List type of variance, what is required in the zone and what is proposed for each variance requested including the lot-line adjustment or minor subdivision)

Including any other variances the Board may deem necessary.

So as to permit (example: construction of ; installation of ; creation of one new developable lot) on the premises located at _____ (address) and designated as Block _____ (#) Lot _____ (#) on the Bridgewater Township Tax Map.

The application and supporting documents are on file with the Secretary of the Bridgewater Township Board and may be inspected at the Bridgewater Township Municipal Complex at 100 Commons Way in the Planning Department, during regular business hours Monday through Friday, 9:00 am to 5:00 pm.

Any interested party may appear at said hearing and participate therein in accordance with the rules of the Board.

(Name of Applicant)

AFFIDAVIT OF SERVICE

STATE OF NEW JERSEY

COUNTY OF _____

I _____ of full age, being dully sworn according to law, upon oath deposes and says that on _____, at least 10 days prior to the hearing date, I did deposit in the United States mail via certified mail, with postage prepaid thereon a copy of the annexed Notice of Hearing. Copies of the certified receipts are also attached hereto. Said notice was sent to all shown on the list annexed hereto which list is a list of owners of property within 200 feet of the effected property which were served as well as any public utilities which have registered with the Township of Bridgewater. The signature of any owner served personally appears alongside their name. Also attached hereto is a certified list of property owners and public utilities prepared by the Tax Assessor of the Township of Bridgewater.

In addition to those shown on the list, notices were served upon (Check if applicable)

- 1. Clerk of adjoining municipalities
- 2. Somerset County Planning Board
- 3. The Department of Transportation

Sworn to and subscribed before me on _____

(mm/dd/yyyy)

Notary Public

NOTICE REQUIREMENTS:

If required, the following proof of satisfying the notice requirements must be filed with the Land Use Administrator in the Planning Department a minimum of 48-hours prior to the hearing date:

1. Affidavit of Service.
2. Copy of the notice served.
3. Certified list of property owners within 200 feet and others served with manner of service
4. Certified Mail receipts stamped by the USPS only.
5. Affidavit of publication from the newspaper in which the notice was published.