### TOWNSHIP OF BRIDGEWATER SOMERSET COUNTY, NEW JERSEY

FORM # 3F

Application #:		Date Filed	
	(Do not w	rite above this line)	
APPLICATION: 1	REQUEST FOR A	N AMENDMENT OF	PRIOR APPROVAL
SUBDIVISION	SI'I	E PLAN	VARIANCE
1. Applicant's name:			
Address:			
Phone:	Fax:	Email:	
2. Owner's name:	**************************************		
		4,	
Phone:	Fax:	Email:	
Address:			
Phone:	Fax:	Email:	
4. Plan Preparer/Engin	.eer's name:		
Address:		Email:	
License #:	Phone:	Fax:	
5. Property address:		Zone Zone	*
6. Block:	Lot:	Tax Map sheet#:	
7. Prior Application # _	and a grant and a state of the		
8. Approval date of price	or application that you v	vish to amend:	
9. Date resolution was	memorialized:		
		en completed (Compliance)?	
		oposal:	
,		ding the changes proposed in c	
application (use sep	arate sheet if necessary)	*	
			* ************************************
		Date:	

### ITEMS TO BE SUBMITTED WITH THE APPLICATION:

Fifteen (15) collated sets of the following are required;

- 1. Letter to the Board requesting an amendment to prior approval, and detailing the changes proposed in comparison to the prior application
- 2. Executed Application form (see page 1)
- 3. Copy of resolution approving the prior application
- 4. Copies of the plan sheet depicting the overall site as approved by the Planning Board or Zoning Board of Adjustment, which set also shows the Signature Block
- 5. Copy of the plan showing the changes that are currently being proposed

### In addition, please submit:

- 6. Three (3) full sets of the Site Plan as approved by the Planning Board
- 7. Application fee in the amount of \$250.00
- 8. Escrow fee in the amount of \$3,000.00 or letter from the Finance Department confirming an escrow balance of at least \$3,000.00
- 9. Executed W-9 form
- 10. Owner consent form signed on Township form (see page 3)

### **PROCEDURE:**

In order for this application to be brought before the Board, all of the items notes above must be submitted. This will assure a complete application. Action on completeness of an application will be taken within forty five (45) days from the date of filing. During this period, you will be notified as to any incomplete items. An application will not be listed for a hearing unless it is deemed complete. After an application is deemed complete, a hearing date will be scheduled on a date which is convenient to the Board.

Prior to the hearing, notice requirements must be met. If these requirements are not properly met, the application cannot be heard. Do not notice for a public hearing until you are advised of the date that has been assigned to your case. If notice is required, you must provide notices and certified mail receipts to the Planning Office 48 hours prior to the scheduled meeting date. If these are not received at that time, your application may be moved down on the agenda to allow time to review the notices and mailings.

### BRIDGEWATER TOWNSHIP CONSENT BY OWNER

I,		, am	the	owner	of	the	property	known	as ·	Block	(s)
***************************************	, Lot (s)	as sh	iown c	n the Ta	x Ma	ap of I	3ridgewate	er Townsh	iip. I a	m awar	e of
the application t	that is to be filed with the Pla	mning Board o	r Zon	ing Boar	d of A	Adjus	tment in B	ridgewate	r Ţov	⁄nship a	nd I
consent to said	application. I permit the Bo	ard, its staff or	other	designa	nted o	fficia	ls to enter	onto the j	propei	ty whic	h is:
the subject of th	ds application and review ex	isting and prop	osed s	site and o	devel	opme	nt element	5,			
I further unders	stand that there are fees that	at must be pai	id in a	accordan	160 W	rith sa	id applica	tion. In t	he cv	enț that	the
applicant does i	not pay all of the appropriate	fees including	g appli	cation a	nd es	crow	fees as req	uired for	this a	pplicatio	on, I
consent to have	e any unpaid balance place	d as an added	asses	sment a	gains.	t my	property t	to be coll	ected	by the	Tax
Collector's offic	ce in due course.										
٠											•
(This form mus	st be signed and notarized, e	ven if the app	licant	is the or	vner)						
								Sig	gnatur	e of Ov	vner:
							<u> </u>				
								,		Ĭ	Date:
							,				<del></del>
	4 17 77 0						•				
	ubscribed before me ay of200					·					
TILLS parameter the second	.,						•	•			
Not	ary Public				•					·	

### 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	at is to be filed with the Planning Board or Zoning Board of
Adjustment in Bridgewater Township and I	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	clements.
I further understand that there are fees that	it 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 t	to have any unpaid balance placed as an added assessment
against my property to be collected by the T	Tax Collector's office in due course.
(This form must be signed and notarized, e	even if the applicant is the owner)
•	Signature of Owner
	Date:
Sworn to and subscribed before me	
this day of 200	•
• .	
Notary Public	•

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

CORFORATIONS:
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
• • • • • • • • • • • • • • • • • • • •
· · · · · · · · · · · · · · · · · · ·

Rev. 4/07

### VARIANCE AND DESIGN WAIVER REPORT

**FORM # 4** 

(SUBMIT WITH ALL APPLICATIONS)

APPLICANT NAME				DA	ATE	
ADDRESS						
PHONE #:		FAX	#: <u></u>			
LOT(S)						
CURRENT ZONING DISTRICT _				1		
TOTAL SQUARE FEET OF ALL					s.f.	
Improved Lot Coverage	Ordinar Require	ice	Existing		Propose	Variance Y or N
(all improvements)	1	%	d	%		%
Floor Area Ratio (F.A.R.)		· ·	<u> </u>	<del></del>		
Lot Area						
Lot Width						
Side Yard (one)						
Side Yard (total of both)	<b>1</b>				•	
Front Yard						
Rear Yard						
Building height and number of stories			Berlin	-		
Parking						· · · · · · · · · · · · · · · · · · ·
ACCESSORY STRUCTURES						
Side yard						
Rear yard	•					
LIST OTHER VARIANCES (type)	-					
			***·-			
TIGT ALL INDUCTION WATURDS	-	•		<del></del>	4	******

### 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		Escrow
	Application	Fee	Escrow	Fee
	Charge	Subtotal	Fee	Subtotal
CONCEPT SKETCH				
A Five Lots or More	\$100.00	49	\$3,000.00	\$
B Less than Five Lots	\$100.00	€	\$1,500.00	49
MINOR SUBDIVISION			,	
A Minor Subdivision	\$125.00	€\$	\$3,000.00	55
B Lot Line Adjustment	\$50.00	\$	\$1,000.00	\$
(No Variances)				
PRELIMINARY MAJOR SUBDIVISION	\$110/ Lot	69	\$5000 + \$500/ Lot	₩
FINAL MAJOR SUBDIVISION	\$55/ Lot	69	\$5000 + \$500/ Lot	\$
VARIANCES - EACH variance shall be computed.				
A Appeals (NJSA'40:55D-70a)	\$100.00 x	€9	\$1,500.00 ×	59
B Interpretation (NJSA 40:55D-70b)	\$100.00 ×	€>	\$1,500.00 ×	\$
C Hardship/Bulk (NJSA 40:55D-70c)	\$250.00 x	69	\$3,000.00	\$
D Use (NJSA 40:55D-70d)	\$250.00 ×	49	\$3,000,000 ×	s)
E Permit (40:55D-34&35)	\$100.00 ×		\$1,000.00 ×	65
AMENDED SUBDIVISION PLAN	50% of initial	•	50% of initial	
OR EXTENSION OF APPROYAL	Fee	€	Escrow	₩
₽.	Total for Application Fee	€	Total Escrow	49

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

PAGE 1 OF 2

ow		ob merced representation of the contract of th		.				
Escrow Fee Subfotal	6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6	€	<b>⇔</b> •	<del>60 69</del>	(A)	& & &	φ φ	\$ \$
Escrow Fee	\$1,000.00 \$1,000.00 \$250/ acre + \$50/ Unit (Minimum Deposit = \$1500.00) \$500.00	\$2,500.00	\$5,000.00 \$ 2000 plus	\$0.20 s.f plus \$50/acre	\$5,000.00	\$2000.00 plus \$0.20 s.f. plus \$50/ acre	\$5000.00 plus \$500/ unit	\$5000.00 plus \$500/ unit
Application Fee Subtotal	. (oc	\$	w w	49 49	es	w w w	Н	w w
Application Charge	\$100.00 \$100.00 \$100/acre + 10/ Unit \$(Minimum Deposit = \$500) \$25.00	\$250.00	(A+B+C) \$250.00 \$500.00 plus	\$0.06/ s.f plus \$100/ acre	\$250.00	\$500 plus \$0.06 s.f. plus \$100/ acre	\$125.00 \$50.00	\$250, plus \$50/ unit
	SITE PLAN - CONCEPT A Minor Plan B Major Plan C Multifamily site D Site Plan Waiver	MINOR SITE PLAN	PRELIMINARY SITE PLAN - NON-RESIDENTIAL (  'A Basic Fee, PLUS B+C  B For All Structures: + C  The first 5000 s.f	Remaining over 5000 s.f C Acreage of lot (or part thereof)		E For All Structures: + C The first 5000 s.f Remaining over 5000 s.f. C Acreage of lot (or part thereof)	PRELIMINARY SITE PLAN - RESIDENTIAL (A+B) A Basic Fee, PLUS B Building Site Plan	FINAL SITE PLAN- RESIDENTIAL (A+B) A Basic Fee, plus B B Building Site Plan

### CONTINUE CALCULATIONS ON PAGE 2 OF 2

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PAGE 2 OF 2

		Application		ш	Escrow
	Application Charge	Fee Subtotal	Escrow	<b>E</b> 0	Fee Subtotal
VARIANCES - Each variance shall be computed.  A Appeals (NJSA 40:55D-70a)	\$100.00 x	₩	\$1,500.00	×	
B Interpretation (NJSA 40:55D-70b)	\$100.00 ×	\$	\$1,500.00	<i>x</i>	
C Hardship/Bulk (NJSA 40:55D-70c)	\$250,00 ×	69	\$3,000.00	* *	
D Use (NJSA 40:55D-70d)	\$250.00 ×	65	\$3,000.00	×	
E Permit (40:55D-34&35)	\$100.00 ×		\$1,000.00	×	
AMENDED SITE PLAN	50% of initial		50% of initial		
OR EXTENSION OF APPROVAL	Fee	\$	Escrow	<del>67)</del>	
L	Total Application Fee	\$	Total Escrow	<i>↔</i>	

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

Еѕстом	Fee	Subtotal		83		\$	63	67	\$								89	\$-
	>			× 00	× 00	. × 26	× 80	× 00:	x								00	Total Escrow
	Escrow	Fee		\$1,500.00	\$1,500.00	\$3,000.00	\$3,000.00	\$1,000.00	\$350,00.				None				\$1,500.00	Total
Application	Fee	Subtotal		<del>(/)</del>	69	49		<del>S</del>	\$				€		. M		€\$	\$
	Application	Charge		\$100.00 ×	\$100.00 x	\$250.00 ×	\$250.00 x	\$100.00 ×	\$75.00 ×	;;	square feet	pool and deck.	\$250.00	•			\$350.00	Total for Application Fee
	4		VARIANCES - Each variance shall be computed.	A Appeals (NJSA 40:55D-70a) \$	(qo <u>/</u> -	_	D Use (NJSA 40:55D-70d) \$	E Permit (40:55D-34&35)	F SIMPLE VARIANCE \$	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	CONDITIONAL USE	Determine whether to authorize	a Conditional use shall be made	by the Planning Board	Tot

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)

### (Rev. Outober 2004)

### Request for Taxpayer Identification Number and Certification

Give form to the requester. Do not

	ant of the Treasury Sevenue Bervice			inidat dire	<b>40, 411</b>	Oution	*		ser	id to	th:	e IRS.	
2	Name (as reported	on your income tax return)			···········			,					
page													
8	Business name, if	different from above			•	•				,			
Print or type Specific Instructions	Check appropriate	box: Individual/ Sole proprietor	Corporation	Partnership	Other	<b>&gt;</b>	~~~~~~			kempi lihhol		ı backu	P
Print o	Address (number,	street, and apt. or sulfe no.)	· -		•	Requeste	r's name	and ad	dress (d	pllon	al)		
Decific	Olty, state, and ZI	P cods							•				
See S	List account numb	per(s) here (optional)	,			· ·			>			,	
Part	] Taxpaye	er Identification Nur	nber (TIN)	· · · · · · · · · · · · · · · · · · ·				· · · · · · · · · · · · · · · · · · ·					
backur allen, s	o withholding, For sole proprietor, or	propriate box. The TIN pr individuals, this is your s disregarded entity, see the tion number (EIN). If you	ocial security num re Part I Instruction	nber (SSN). Howe ons on bage 3. Fo	ver, for a re	sident lles. It ls		l accur	ty num	ber 1			]
	lf the account is l	n more than one name, se					-	oyer Ide	ntificat	lon ni	umbi	er	]
Part	Certific	ation						<u> </u>		1			.1.
Under	penalties of perju	ry, I certify that:						-					
1. The	number shown	on this form is my correct	t texpayer identific	cation number (or	I am waltin	g for a nur	nber to	be iss	ued to	me).	and		
2. I at	m not subject to I venue Service (IR	backup withholding becau S) that I am subject to ba n no longer subject to bac	ise: (a) i am exem	pt from backup v as a result of a fa	vithheldina.	or (b) I hav	ve not i	neen no	tified t	v th	e Inf	ernel	

- 3. I am a U.S. person (including a U.S. resident allen).

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 falled 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 Signature of Here 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

- 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 Allens and Foreign Entities).

Nonresident alien who becomes a resident alien. Generally, only a nonresident allen 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 allen 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

- 1. The treaty country. Generally, this must be the same treaty under which you claimed exemption from tax as a nonresident allen.
  - 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.



### THE TOWNSHIP OF BRIDGEWATER

T00 COMMONS WAY / BRIDGEWATER, NJ 08807 PH 908-725-6300/FAX 908-725-4163

OFFICE OF THE TAX ASSESSOR

### REQUEST FOR 200' RADIUS LIST OF CERTIFIED PROPERTY OWNERS

DATE		вьоск		LOT	
PROPERTY LOCATION_		0.100	· · · · · · · · · · · · · · · · · · ·		<del>*************************************</del>
APPLICANT					
PICK-UP	TELEPHONE_		EMAIL_	1	
MAIL TO	<del></del>				
ADDRESS				· · · · · · · · · · · · · · · · · · ·	
CITY		STATE		ZIP	
PAID- CHECK #		MACON CONTRACTOR OF THE PROPERTY OF THE PROPER		CASH	
MAIL TO:	BRIDGEWATER 100 COMMON BRIDGEWATER		CE		

### **PLEASE NOTE:**

THE CHARGE FOR THIS LIST IS \$10.00 FOR FORTY (40) OR LESS PROPERTIES. EACH PROPERTY IN EXCESS OF FORTY (40) 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 FEE PER HOUR FOR THE COST OF PREPARING A LIST OF CERTIFIED PROPERTY OWNERS

Our policy is that a certified list is not started until the check is received by our office. Once received, we will make every effort to get this list to you as soon as possible

### 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	t on(dat	e of public hearing)	at	(time)	_P.M. a
public hearing will be held b	efore the Bridgew	rater Township(	Planning or	Zoning)	Board at
the Bridgewater Municipal (	Courtroom, 100 Co	ommons Way, Bridge	ewater, Now	Jersey to	consider the
application of applica	nt's name)	for the followin	g:		
,,		required in the zone e lot-line adjustment			or each
Including an	y other variances t	he Board may deem	necessary.		
So as to permit (example	e: construction of	; installation of; cre	ation of one	new devel	opable lot)
on the premises located at _	(address)	and designated	as Block	(#)	Lot
(#) on the B	Brldgewater Towns	ship Tax Map.		•	
The application and	supporting docum	ents are on file with	the Secretar	y of the Br	idgewater
Township Board and may b	e inspected at the	Bridgewater Townsh	ip Municipa	l Complex	at 100
Commons Way in the Plant	ing Department, d	luring regular busine	ss hours Mo	nday throu	gh Friday, 9:00
am to 5:00 pm.		<del>-</del>			
Any interested party	may appear at sai	id hearing and partici	pate therein	in accorda	nce with the
rules of the Board.					
-	-		(Name of A	pplicant)	

### AFFIDAVIT OF SERVICE

STATE OF NEW JERSEY	
COUNTY OF	T
Ι	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 v	vere served as well as any public utilities which have registered
with the Township of Bridgewater. The	e signature of any owner served personally appears alongside
their name. Also attached hereto is a cert	tified list of property owners and public utilities prepared by the
Tax Assessor of the Township of Bridge	water.
In addition to those shown on the list, no	tices were served upon (Check if applicable)
( ) 1. Clerk of adjoining	municipalities
( ) 2. Somerset County	Planning Board
( ) 3. The Department o	f Transportation
Sworn to and subscribed before me on	
D MOUT TO SHIP SHOSON DOTONE THE OH	(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.

### ESCROW AGREEMENT

TH	IS A	GREE	MENT	made	this		day	of	,	20	,	between
				he	ereinafte	er referre	ed to as	s "Ap	plic	ant", a	and the	Planning
or Zoning	Board	of the	Township	of Brid	lgewatei	, herein	after r	eferre	ed to	o as "	Board'	', and the
Township (	Counci	of the	Township	of Brid	gewater	, hereina	fter re	ferrec	l to	as "To	ownshi	p".

WHEREAS, the Applicant has filed an application for development under the Township's Zoning Ordinance ("Ordinance"); and

WHEREAS, the Ordinance requires the Applicant to establish an escrow whereby work required to be performed by professionals employed by the Board will be paid for by the Applicant as required under the provisions of the Ordinance cited above; and

### WITNESSETH:

IT IS mutually agreed between the parties that:

Section 1. Purposes. The Board authorizes its professional staff, (generally Planner, Engineer and /or Attorney) to review, inspect, and study all plans, documents, statements, improvements, and provisions made by the Applicant in conforming to the requirements of the Ordinance cited and referred to above. Moreover, the Board directs that its Professional Staff, thru oral or written reports, detail its professional findings to the Applicant, the Board and where necessary to the Administration

The Applicant agrees to pay all reasonable professional fees incurred by the Board for the performance of the duties outlined above.

Section 2. Escrow Established. Applicant, Board and Township, in accordance with the provisions of this agreement, hereby agree to the creation of an escrow account to be established by the CFO of the Township of Bridgewater, to be maintained in a banking institution or savings and loan association in this State insured by an agency of the federal government, or in any other fund or depository approved for such deposits by the State of New Jersey, in an account bearing interest at the minimum rate currently paid by the institution or depository on time or savings deposits.

**Section 3**. Escrow Funded. Applicant, upon signed execution of this agreement shall remit funds, within 14 business days to the Township's Land Use Administrator, to be deposited by the CFO in the depository referred to in Section 2.

Section 4. Increase in Escrow Fund. If during the existence of this agreement the escrow funds held by the Township shall fall below 25% of the original escrow, Applicant shall within fourteen (14) business days from the date of receipt of written notice by the Land Use Administrator to the Applicants point of contact, either by email or US Postal service, remit such additional funds with the Land Use Administrator to replenish the escrow to at least 50% of the original escrow. During this period the professional staff, at their option, may cease all review activities. The written notice sent by the Land Use Administrator setting forth the amount of the

requests for additional funds to:	
Applicant Name:	
Applicant Address:	
Applicant E-mail:	
Applicant Phone:	
<b>Section 5.</b> <u>Billing.</u> All bills from professional staff shall be submit N.J.S.A. 40:55D-53.2.	ted in accordance with
IN WITNESS WHEREOF the parties hereto have their hands and written above.	seal the date first
	,Applicant
Sworn and subscribed to before me this dayof, 20	

deficit and the member or members of the professional staff to whom the additional sums are due. Unless otherwise shown, receipt shall be presumed to have occurred within three (3) business days after US Postal mailing or one (1) day for email. The Land Use Administrator shall submit all