MONTVILLE TOWNSHIP
WAIVER OF SITE PLAN APPLICATION
(973) 331-3319 or jmowles@montvillenj.org

All new retail and commercial tenants are required to apply for a request for "Waiver of Site Plan" prior to occupancy.

----------**Municipal Staff Use Only**----------

Date Filed: _____$250 Fee Rc'd: __ _____ Escrow Deposit (if necessary): _____ Waiver No.:_____

----------**APPLICANT TO FILL OUT**----------

OVERVIEW OF PROCESS

SCHEDULING OF MEETING

All **COMPLETE** waiver applications must be submitted (7) days prior to a meeting in order to be placed on the agenda. The waiver will either be approved or denied by the Planning Board/Subcommittee. For any application for a property that had a site plan approved more than (7) years ago, is requesting storage of hazardous materials, a change to the façade, or has outstanding violations the Planning Board may require a new site plan be submitted.

REQUIRED REPORTS

Approval from Health, Traffic Safety, Fire prevention, Water & Sewer, & Construction are required. Any Planning Board/Planning Board Subcommittee approval for a waiver **is conditioned upon approval** from these departments and compliance with any conditions of their reports. It may take a few weeks after your approval by the Planning Board/Subcommittee to receive these reports.

ZONING PERMIT

Once **all approvals** have been received, a zoning permit will be issued. This permit is considered your "certificate of occupancy" to tenant the building and open the business unless building permits are required by the Construction Department.

****The following information MUST be submitted in order to process the application and schedule a hearing:**

☐ **SECTION 1: Cover letter**
Please submit a cover letter explaining the proposed operations on the site with the completed application and fees.

SECTION 2: Fees
☐ **$250** Waiver Filing fee - Submit with application directly to Land Use Office - made payable to "Montville Township"
☐ **$25** Zoning Permit fee - Submit with application directly to Land Use Office - made payable to "Montville Township"
☐ **$90** Fire Prevention fee -**Mail Complete Application Package & Fee Directly** to appropriate Fire Prevention Bureau
****Fire District is ___ Pine Brook _____ Montville _____ Towaco

☐ **SECTION 3: Applicant & Owner Information**

Block: _____Lot:_____ Zone: _____ Has a site plan been approved within the last seven (7) years? Y / N

Proposed Business Name: _____ Square Footage of unit_____

Property Location Address: _____ Pine Brook __ / Montville __ / Towaco __

Unit / Bldg#:_____ Proposed Use: _____ Prior Use (if known): _____

Contact Name: _____ Contact Mailing Address (Current):_____

Tel # _____ E-mail _____

Property Owner_____ Contact Name _____

Tel # _____ E-mail _____

☐ **SECTION 4: Signature of Applicant - REQUIRES NOTARY**

APPLICANT ATTESTS THAT ALL INFORMATION IS ACCURATE

Signature of applicant _____ Printed Name: _____

Notary:

Sworn to and subscribed, before me this _____day of_____, 20_____

_____

☐ **SECTION 5: Affidavit of Owner Granting Permission - REQUIRES NOTARY**

FILL OUT IF APPLICANT *IS NOT THE* PROPERTY OWNER

I, _____ as Owner of Block: _____ Lot: _____ of full age, being duly sworn according to law, with a mailing address of _____ verifies and acknowledges as the owner in fee of said lot, piece or parcel of land referenced herein that I authorize tenant / applicant _____to file this application. I also acknowledge I understand that any conditions and/or requirements imposed at the time this tenancy is reviewed by the municipally is also an obligation imposed upon the owner of record.

Dated: _____ _____

(Owner's Signature)

Sworn to and subscribed, before me this _____day of_____ 20_____

_____

☐ **SECTION 6:**

Are you requesting a 24 hour operation? Yes☐ No ☐

DAYS	HOURS OF OPERATION	Total Number of Employees	Number of Employees per shift	Number/Type & Size of Commercial Vehicles to be parked overnight
Monday				
Tuesday		**Overnight Parking of Commercial Vehicles or Vans (show location on site plan)?** Y/ N		
Wednesday				
Thursday				
Friday				
Saturday				
Sunday				

SECTION 7: Site Plan Information

☐ FLOOR PLAN - Reflecting the breakdown of your tenant space in sq ft for office, retail, warehouse, bathrooms, storage, etc.

☐ PARKING CHART with parking requirements of **all tenants** calculated (see parking schedule). Add more sheets if necessary.

THIS INFORMATION MUST BE SUBMITTED IN FULL OR REVIEW OF YOUR APPLICATION MAY BE DELAYED

TENANT NAME & SPECIFIC USE	SQUARE FEET (broken down office/warehouse /etc)	COMMON AREA SQ. FT. (not calculated in formula)	PARKING CALCUATION BASED ON USE PER SCHEDULE E (Attached) (ie 1 per 250 s.f. =)	PARKING REQUIRED	PARKING PROVIDED

TOTAL Number of Parking Spaces Existing on Site_____

Was a Variance for parking previously granted? Y/N If YES Number of spaces granted_____

☐ SITE PLAN (copy of most recent) reflecting existing building & parking lot layout with parking spaces indicated.

☐ SIGN DETAILS ***for any new sign***. Submit details and depict location on site plan, total square footage, height, number of colors, type of font and letter size, as well as construction materials and any illumination.

☐ OUTDOOR STORAGE (Yes) __ (No) __ If yes, depict type and location on the site plan. **If new, screening or buffering may be required and may require a full site plan*

☐ **SECTION 8: Board of Health Information**

1. Provide a list of chemicals/substances (along with material safety data sheets) that may be used or stored at the facility including their quantities. Additional information may be requested by the Health Department depending upon intended use of the facility.

Please check one:

☐ I propose to store/ utilize ONLY common cleaners/chemicals used for janitorial purposes (window cleaner, disinfectants, all-purpose cleaner, etc.) on the premises.

☐ I propose to store/utilize chemicals and/or hazardous substances on the premises and/or as part of any on-site operation, and a list of these chemicals and/or hazardous substances, along with a Safety Data Sheet for each one, are included with this application.

Signature of applicant _____ Printed Name: _____

2. Is the site serviced by municipal water? Y/N; Is there a well? Y/N; Is it in operation? Y/N

3. Is the site serviced by municipal sewer? Y/N Is there a septic system? Y/N

4. Will the building be served by a mobile food vendor? Y/N; If yes, what are the proposed hours and name of vendor?

_____ _____

5. Will there be vending machines? Y/ N

Off-Street Parking Requirements

Type of Building or Use	Minimum Number of Parking Spaces
Nonresidential	
Animal hospital or clinic	1 per 400 square feet GFA
Assisted living facility	Per Residential Site Improvements Standards (RSIS)
Automatic car wash	2 per service bay or lane, plus 1 per employee on peak shift [1, 2]
Banks and financial institutions	
With drive-through facilities	1 per 300 square feet GFA
Without drive-through facilities	1 per 200 square feet GFA
Bars and taverns	0.5 per seat
Bowling alley	5 per bowling lane
Building materials and contractor's yards	1 per 400 square feet GFA, plus 1 per 5,000 square feet outdoor display area
Business and vocational schools	1 per 200 square feet GFA
Child-care center	1 per 150 square feet GFA
Community residence/community shelter	1 per employee, plus 1 per 5 residents
Computer and data processing center	1 per 200 square feet GFA
Convention, conference and corporate training center	1 per 4 seats based on design capacity of the building, or 1 per 200 square feet GFA, whichever is greater [3]
Country clubs	See §230-198.M.
Elder-care center	1 per employee at maximum shift, plus 1.0 per 10 enrollees
Funeral home, mortuary	1 per 3 seats in the chapel
Garage, public	1 per gasoline pump, grease rack or similar service area, plus 1 per 500 square feet GFA of shop or garage [1]
Greenhouse, garden center	1 per 300 square feet GFA, plus 1 per 2,500 square feet outdoor display area
Health and fitness center	1 per 200 square feet GFA
Hospital	3.9 per patient bed
Hotel, motel	1.2 per sleeping room
Indoor tennis, racquetball and similar court sports	3 per court
Kennel	See §230-165.H.
Laboratories for research, design and experimentation	1 per 500 square feet GFA
Laundromat	1 per 300 square feet GFA
Manufacturing, fabrication, packaging and treatment of products	1 per 500 square feet GFA
Medical clinics and laboratories	1 per 200 square feet GFA
Motor vehicle sales, new	1 per 400 square feet GFA, plus 1 per 5,000 square feet outdoor display area and 1 per service bay
Motor vehicles service station	1 per gasoline pump, grease rack or similar service area [1]
Moving and storage operations	1 per 1,500 square feet GFA
Museum, art gallery, library	1 per 300 square feet GFA
Nonprofit club, lodge, civic and fraternal organization	1 per 150 square feet GFA
Nursing home	0.5 per patient bed
Offices for business, professional and administrative purposes	1 per 250 square feet GFA
Personal service establishments:	
Dry cleaning	1 per 700 square feet GFA
Personal care services, including barber and beauty shops, nail salons, etc.	2 per treatment station, or 1 per 200 square feet GFA, whichever is greater
Other personal service establishments not specifically listed	1 per 200 square feet GFA
Place of worship	0.3 per seat of fixed capacity (benches or pews shall be considered as 1 seat per 24 linear inches), or 1 per 50 square feet GFA if no fixed seats
Plumbing, heating, electrical supply and air conditioning shops/showrooms	1 per 400 square feet GFA
Printing and duplication	1 per 300 square feet GFA
Professional studio for photography and fine arts	1 per 200 square feet GFA
Public buildings and uses, excluding public utility buildings and power-generating stations	1 per 250 square feet GFA

Residential health care facility	0.5 per patient bed, or 0.5 per dwelling unit if facility contains individual dwelling units
Restaurants:	
Sit-down restaurant, with bar	0.5 per seat
Sit-down restaurant, without bar	0.3 per seat
Fast-food restaurant, with drive-through	1 per 100 square feet GFA
Fast-food restaurant, without drive-through	
Hamburger	1 per 80 square feet GFA
Non-hamburger	1 per 120 square feet GFA
Retail stores and shops:	
General retail (not in shopping center)	1 per 250 square feet GFA
Grocery store (freestanding)	1 per 200 square feet GFA
Big box/superstore (freestanding)	1 per 200 square feet GFA
Furniture, appliances, other heavy/hard goods	1 per 400 square feet GFA
Shopping centers:	
< 400,000 square feet GLA	1 per 250 square feet GLA
400,000 to 599,999 square feet GLA	1 per 225 square feet GLA
600,000 > square feet GLA	1 per 200 square feet GLA
School, public and private, teaching academic subjects	0.3 per student
School bus storage and maintenance	1 per 1,500 square feet GFA
Self-storage facilities	1 per 2,500 square feet GFA
Stable and arena, commercial	0.3 per seat, or per person in permitted capacity if no seats
Studio for instruction of voice, art, dance, martial art and musical instrument	1 per 200 square feet GFA
Theaters, indoor	0.3 per seat
Warehouse	1 per 1,500 square feet GFA
Wholesale distribution center	1 per 500 square feet GFA

Footnotes to Schedule E:

GFA = gross floor area

GLA = gross leasable area

[1] See §230-147 for additional parking requirements relating to accessory commercial or personal service uses.

[2] See §230-147.K.3. for additional stacking requirements.

[3] Convention, conference and corporate training centers which are accessory to a hotel shall have a parking requirement of 1 space per 100 square feet GFA, which shall be in addition to the minimum parking requirement for the hotel itself.

Additional requirements relating to Schedule E:

(1) Any building containing more than one (1) use shall meet the combined parking space requirements for all uses in the building. Any change in use within a building shall be required to meet the minimum parking requirements for the new use.

(2) If it can be clearly demonstrated that, because of the peculiar nature of any use, all the required parking is not necessary, the Planning Board may permit a reduction in the amount of parking area to be paved; provided, however, that the entire required parking area shall be shown on the site plan so that it will be available should future conditions require it.

(3) For any use not listed above, there shall be provided at least one (1) parking space for each two hundred (200) square feet of floor area, unless otherwise required by the approving authority.

Zoning Permit No.: _____

MONTVILLE TOWNSHIP

ZONING PERMIT FOR WAIVER OF SITE PLAN - NEW TENANT

Anthony Petrillo, Assistant Zoning Officer at (973) 331-3320 apetrillo@montvillenj.org

----------**APPLICANT TO FILL OUT**----------

SECTION 1: Property Information Block: _____ Lot:_____ Zone: _____ Date: _____

Property Location Address: _____ Pine Brook __ / Montville __ / Towaco __

Mail Permit to:_____

Property Owner Name _____ Tel # _____ Fax #_____ E-mail _____

Tenant Name:_____ Company:_____ Address: _____Tel:_____

SECTION 2: Fees- Make check payable to "Montville Township":

O New tenant $25.00 Waiver No _____ Tenant Company / Contact Name:_____/_____
Includes sign? Yes ☐ No ☐

***Note: If sign was not included in original application or approved as part of Waiver Application, then a separate zoning permit must be applied for with appropriate fee.**

SECTION 3: Signature of Owner *MUST be signed by property owner **NOT** contractor*

Owner attests that all information is accurate.

Signature of Property Owner _____ Printed Name: _____

Notary: Sworn to and subscribed, before me. This _____day of_____, 20_____.

_____
A Notary Public of New Jersey

----------**Municipal Staff Use Only**----------

( ) Approved ***If new tenant, see Waiver Approval Letter**
( ) Denied *See explanation below or letter attached

This is to certify that the above-described premises together with any building thereon, are used or will be used for:

_____

_____

Attachments include: Resolution ( ) Plans ( ) Approval letter ( ) Other ( ) _____

Approved /Denied by: _____ *Executed On:* _____
Anthony Petrillo, Assistant Zoning Officer

Zoning - Original ( ) Applicant Copy ( )

Amount Paid _____	*Cash* ___ *Check* __	*Receipt No.* _____

APPLICATION FOR CERTIFICATE OF REGISTRATION

FIRE PREVENTION BUREAU
DISTRICT #1 (MONTVILLE)
86 River Road
P.O. Box 152
Montville, NJ 07045
973-334-6430
mfdfireprev@montvillefd.org

☐

FIRE PREVENTION BUREAU
DISTRICT #2 (TOWACO)
27 Whitehall Road
P.O. Box 353
Towaco, NJ 07082
973-334-4636
fpb@towacofd.org

☐

FIRE PREVENTION BUREAU
DISTRICT #3 (PINE BROOK)
47 Bloomfield Avenue
P.O. Box 204
Pine Brook, NJ 07058
973-227-5504
pbfireprev@optonline.net

☐

PLEASE SELECT WHICH FIRE DISTRICT YOU ARE REGISTERING WITH

The Uniform Fire Code states:
The owner of all businesses, occupancies, buildings, structures, or premises required to be inspected under Section 8.52.110 shall apply annually to the local Enforcing Agency for a Certificate of Registration upon forms provided by the Fire Official. It shall be a VIOLATION of this ORDINANCE for any owner to fail to return such forms to the Local Enforcing Agency and/or Fire Official within thirty (30) days of receipt. 8.52.120

This area for office use only

Local ID #: _____ State ID #: _____ Date Registered: _____ Reg. fee: $_____

DESCRIPTION OF USE/OCCUPANCY OF THIS BUILDING/BUSINESS

☐ Business Name: _____

Street Address: _____ Block _____ Lot _____

_____ Phone #: _____

Do you _____ OWN _____ LEASE

☐ Building Owner's Name: _____

Federal ID #: _____ Phone #: _____ email address: _____

Street Address: _____

_____

☐ Business Owner's Name: _____

Federal ID #: _____ Phone #: _____ email address: _____

Street Address: _____

_____

Business Type: ☐ Individual ☐ Partnership ☐ Corporation ☐ Other

Emergency Contacts:

Name: _____ Phone #: _____

Name: _____ Phone #: _____

Please check where all mail, actions, orders or notices are to be sent.

Total building square footage: _____ Business occupied square footage: _____

Truss Roof: _____ Floor: _____ Both: _____

Alarm/Suppression System Information:

Describe System: _____

_____

Monitoring Company Name: _____ Phone #: _____

Describe of use/occupancy of this building/business:

_____

_____

_____

Are any hazardous materials being stored or used on site as part of the operation of the business?

_____

_____

_____

I hereby acknowledge that I have read this application, that the information given is correct, that I am the owner or duly authorized to act in the owner's behalf, and as such hereby agree to comply with the applicable requirements of the uniform fire safety code as well as any specific conditions imposed by the Fire Official.

_____ _____

Print Name Signature

Title: _____ Date _____

Enclosed Check #(s) _____