



**Borough of Milltown**  
 Zoning Board  
 39 Washington Ave.  
 Milltown, NJ 08850  
 (732)828-2100 ext. 155

## Zoning Board of Adjustment Affidavit of Applicant

Filed \_\_\_\_\_  
 Hearing \_\_\_\_\_  
 Disposition \_\_\_\_\_  
 Cal. No. \_\_\_\_\_

Name of Applicant \_\_\_\_\_ Block \_\_\_\_\_ Lot \_\_\_\_\_

Applicant E-mail \_\_\_\_\_ Phone Number \_\_\_\_\_

Address of Applicant: \_\_\_\_\_  
Address Town State Zip Block Lot

Address of Affected Premise \_\_\_\_\_  
Address Town Block Lot Milltown

### Affidavit of Applicant

\_\_\_\_\_, of full age, being duly sworn according to law, on oath deposes and says that all of the statements contained in the papers submitted herewith are true.

Stamp of Notary Public

\_\_\_\_\_  
 Signature of Applicant

Sworn and Subscribed to me on this  
 \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_

\_\_\_\_\_  
 Signature of Notary Public



**Borough of Milltown**  
 Zoning Board  
 39 Washington Ave.  
 Milltown, NJ 08850  
 (732)828-2100 ext. 155

## Zoning Board of Adjustment Affidavit of Authorization

Filed \_\_\_\_\_  
 Hearing \_\_\_\_\_  
 Disposition \_\_\_\_\_  
 Cal. No. \_\_\_\_\_

Name of Applicant \_\_\_\_\_ Block \_\_\_\_\_ Lot \_\_\_\_\_

Applicant E-mail \_\_\_\_\_ Phone Number \_\_\_\_\_

Address of Applicant: \_\_\_\_\_  
Address Town State Zip Block Lot

Address of Affected Premise \_\_\_\_\_  
Address Town Block Lot

### Affidavit of Authorization

If anyone other than the owner is making this application the following authorization must be executed.

To the Planning Board:

\_\_\_\_\_ is hereby authorized to make the within application regarding the property known as \_\_\_\_\_.

Stamp of Notary Public

\_\_\_\_\_  
 Signature of Owner

Sworn and Subscribed to me on this  
 \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_

\_\_\_\_\_  
 Signature of Notary Public



**Borough of Milltown**  
 Zoning Board  
 39 Washington Ave.  
 Milltown, NJ 08850  
 (732)828-2100 ext. 155

## Zoning Board of Adjustment Affidavit of Ownership

Filed \_\_\_\_\_  
 Hearing \_\_\_\_\_  
 Disposition \_\_\_\_\_  
 Cal. No. \_\_\_\_\_

Name of Applicant \_\_\_\_\_ Block \_\_\_\_\_ Lot \_\_\_\_\_

Applicant E-mail \_\_\_\_\_ Phone Number \_\_\_\_\_

Address of Applicant: \_\_\_\_\_  
Address Town State Zip Block Lot

Address of Affected Premise \_\_\_\_\_  
Address Milltown Town Block Lot

### Affidavit of Ownership

\_\_\_\_\_, of full age, being duly sworn according to law, on oath deposes and says that the deponent resides at \_\_\_\_\_ in the municipality of \_\_\_\_\_ County of \_\_\_\_\_ State of \_\_\_\_\_, that \_\_\_\_\_ is the owner in fee of all that certain lot, piece or parcel of land situated, lying and being in the municipality aforesaid and known and designated as.

Stamp of Notary Public

\_\_\_\_\_  
 Signature of Owner

Sworn and Subscribed to me on this  
 \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_

\_\_\_\_\_  
 Signature of Notary Public



**Borough of Milltown**  
 Zoning Board  
 39 Washington Ave.  
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 (732)828-2100 extension 155

## Zoning Board of Adjustment Affidavit of Service

Name of Applicant \_\_\_\_\_ Block \_\_\_\_\_ Lot \_\_\_\_\_

Address of Applicant: \_\_\_\_\_  
Address      Town      State      Zip      Block      Lot

\_\_\_\_\_, of full age, being duly sworn and according to law, on his/her oath deposes and says that he/she resides at \_\_\_\_\_ in the County of \_\_\_\_\_ and State of \_\_\_\_\_ and that he/she did, on \_\_\_\_\_, at least 10 (ten) days prior to the hearing date, give personal notice to all property owners within 200 feet of the property affected by appeal number \_\_\_\_\_ located at \_\_\_\_\_. Said Notice was given by either handing a copy to the property owner, his agent in charge of the property, or by sending said notice by certified mail. Copies of the registered receipts are attached hereto.

**Notices were also served upon**

(Check if applicable)

The Clerk of the \_\_\_\_\_ of \_\_\_\_\_  
 \_\_\_\_\_ of \_\_\_\_\_

Middlesex County Planning Board

Director of the Division of State and Regional Planning

Department of Transportation

A copy of said notice is attached hereto.

Also attached to this affidavit is a list of owners of property within 200 feet of the affected property who were served, showing the block and lot numbers of each property as same appear on the municipal tax map.

Sworn and subscribed to before me this \_\_\_\_\_ day  
 of \_\_\_\_\_, 20 \_\_\_\_.

Stamp of Notary

\_\_\_\_\_  
 Signature of Person Making Affidavit

\_\_\_\_\_  
 Signature Notary Public of New Jersey



**Borough of Milltown**  
 Zoning Board  
 39 Washington Ave.  
 Milltown, NJ 08850  
 (732)828-2100 extension 155

## Zoning Board of Adjustment Sample Notice of Hearing

Name of Applicant \_\_\_\_\_ Block \_\_\_\_\_ Lot \_\_\_\_\_

Address of Applicant: \_\_\_\_\_  
Address      Town      State      Zip      Block      Lot

Sent to: \_\_\_\_\_ Run Date: \_\_\_\_\_

Please take notice that a public hearing will be held at 8:00 p.m. on \_\_\_\_\_ at a regular meeting of the Planning Board of the Borough of Milltown, at 39 Washington Ave. Milltown, NJ.

The subject of the hearing will be \_\_\_\_\_'s application for \_\_\_\_\_ to permit the following:

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This plan is for the site known as Block \_\_\_\_\_ Lot(s) \_\_\_\_\_, located in the vicinity of \_\_\_\_\_, in the \_\_\_\_\_ Zone.

A copy of the plan and all supporting documents are on file in the office of the Planning Board for public inspection

Applicant Name \_\_\_\_\_  
 Applicant Address \_\_\_\_\_  
 \_\_\_\_\_



**Borough of Milltown**  
 Zoning Board  
 39 Washington Ave.  
 Milltown, NJ 08850  
 (732)828-2100 ext. 155

## Zoning Board of Adjustment List of Property Owners Served

Filed \_\_\_\_\_  
 Hearing \_\_\_\_\_  
 Disposition \_\_\_\_\_  
 Cal. No. \_\_\_\_\_

Name of Applicant \_\_\_\_\_ Block \_\_\_\_\_ Lot \_\_\_\_\_

Applicant E-mail \_\_\_\_\_ Phone Number \_\_\_\_\_

Address of Applicant: \_\_\_\_\_  
Address Town State Zip Block Lot

Address of Affected Premise \_\_\_\_\_  
Address Milltown Town Block Lot

**List of Property Owners Served**

The list of required names and addresses shall be obtained from the Municipal Clerk. This form shall be typewritten and shall clearly indicate the Type of Service utilized for each recipient.

Local Property Owners- Personal Service  
 Out of Town Property- Certified Mail, Return Receipt Requested

	<u>Name</u>	<u>Address</u>	<u>Type of Service</u>
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____
5.	_____	_____	_____
6.	_____	_____	_____
7.	_____	_____	_____
8.	_____	_____	_____
9.	_____	_____	_____
10.	_____	_____	_____
11.	_____	_____	_____
12.	_____	_____	_____
13.	_____	_____	_____
14.	_____	_____	_____
15.	_____	_____	_____
16.	_____	_____	_____
17.	_____	_____	_____
18.	_____	_____	_____
19.	_____	_____	_____
20.	_____	_____	_____
21.	_____	_____	_____
22.	_____	_____	_____
23.	_____	_____	_____
24.	_____	_____	_____
25.	_____	_____	_____

## 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 shown 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 Regulations sections 301.7701-6(a) and 7(a) for additional information.

**Foreign person.** If you are a foreign person, do not use Form W-9. Instead, 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 to Form W-9 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.

4. The type and amount of income that qualifies for the exemption from tax.

5. Sufficient facts to justify the exemption from tax under the terms of the treaty article.

**Example.** Article 20 of the U.S.-China income tax treaty allows an exemption from tax for scholarship income received by a Chinese student temporarily present in the United States. Under U.S. law, this student will become a resident alien for tax purposes if his or her stay in the United States exceeds 5 calendar years. However, paragraph 2 of the first Protocol to the U.S.-China treaty (dated April 30, 1984) allows the provisions of Article 20 to continue to apply even after the Chinese student becomes a resident alien of the United States. A Chinese student who qualifies for this exception (under paragraph 2 of the first protocol) and is relying on this exception to claim an exemption from tax on his or her scholarship or fellowship income would attach to Form W-9 a statement that includes the information described above to support that exemption.

If you are a nonresident alien or a foreign entity not subject to backup withholding, give the requester the appropriate completed Form W-8.

**What is backup withholding?** Persons making certain payments to you must under certain conditions withhold and pay to the IRS 28% of such payments (after December 31, 2002). This is called "backup withholding." Payments that may 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.

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

**Payments you receive will be subject to backup withholding if:**

1. You do not furnish your TIN to the requester, or
2. You do not certify your TIN when required (see the Part II instructions on page 4 for details), or
3. The IRS tells the requester that you furnished an incorrect TIN, or
4. 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
5. You do not certify to the requester that you are not subject to backup withholding under 4 above (for reportable interest and dividend accounts opened after 1983 only).

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

## Penalties

**Failure to furnish TIN.** If you fail to furnish your correct TIN to a requester, you are subject to a penalty of \$50 for each such failure unless your failure is due to reasonable cause and not to willful neglect.

**Civil penalty for false information with respect to withholding.** If you make a false statement with no reasonable basis that results in no backup withholding, you are subject to a \$500 penalty.

**Criminal penalty for falsifying information.** Willfully falsifying certifications or affirmations may subject you to criminal penalties including fines and/or imprisonment.

**Misuse of TINs.** If the requester discloses or uses TINs in violation of federal law, the requester may be subject to civil and criminal penalties.

## Specific Instructions

### Name

If you are an individual, you must generally enter the name shown on your social security card. However, if you have changed your last name, for instance, due to marriage without informing the Social Security Administration of the name change, enter your first name, the last name shown on your social security card, and your new last name.

If the account is in joint names, list first, and then circle, the name of the person or entity whose number you entered in Part I of the form.

**Sole proprietor.** Enter your individual name as shown on your social security card on the "Name" line. You may enter your business, trade, or "doing business as (DBA)" name on the "Business name" line.

**Limited liability company (LLC).** If you are a single-member LLC (including a foreign LLC with a domestic owner) that is disregarded as an entity separate from its owner under Treasury regulations section 301.7701-3, enter the owner's name on the "Name" line. Enter the LLC's name on the "Business name" line. Check the appropriate box for your filing status (sole proprietor, corporation, etc.), then check the box for "Other" and enter "LLC" in the space provided.

**Other entities.** Enter your business name as shown on required Federal tax documents on the "Name" line. This name should match the name shown on the charter or other legal document creating the entity. You may enter any business, trade, or DBA name on the "Business name" line.

**Note.** You are requested to check the appropriate box for your status (individual/sole proprietor, corporation, etc.).

### Exempt From Backup Withholding

If you are exempt, enter your name as described above and check the appropriate box for your status, then check the "Exempt from backup withholding" box in the line following the business name, sign and date the form.

Generally, individuals (including sole proprietors) are not exempt from backup withholding. Corporations are exempt from backup withholding for certain payments, such as interest and dividends.

**Note.** If you are exempt from backup withholding, you should still complete this form to avoid possible erroneous backup withholding.

**Exempt payees.** Backup withholding is not required on any payments made to the following payees:

1. An organization exempt from tax under section 501(a), any IRA, or a custodial account under section 403(b)(7) if the account satisfies the requirements of section 401(f)(2),
2. The United States or any of its agencies or instrumentalities,
3. A state, the District of Columbia, a possession of the United States, or any of their political subdivisions or instrumentalities,
4. A foreign government or any of its political subdivisions, agencies, or instrumentalities, or
5. An international organization or any of its agencies or instrumentalities.

Other payees that may be exempt from backup withholding include:

6. A corporation,

- 7. A foreign central bank of issue,
- 8. A dealer in securities or commodities required to register in the United States, the District of Columbia, or a possession of the United States,
- 9. A futures commission merchant registered with the Commodity Futures Trading Commission,
- 10. A real estate investment trust,
- 11. An entity registered at all times during the tax year under the Investment Company Act of 1940,
- 12. A common trust fund operated by a bank under section 584(a),
- 13. A financial institution,
- 14. A middleman known in the investment community as a nominee or custodian, or
- 15. A trust exempt from tax under section 664 or described in section 4947.

The chart below shows types of payments that may be exempt from backup withholding. The chart applies to the exempt recipients listed above, 1 through 15.

IF the payment is for . . .	THEN the payment is exempt for . . .
Interest and dividend payments	All exempt recipients except for 9
Broker transactions	Exempt recipients 1 through 13. Also, a person registered under the Investment Advisers Act of 1940 who regularly acts as a broker
Barter exchange transactions and patronage dividends	Exempt recipients 1 through 5
Payments over \$600 required to be reported and direct sales over \$5,000 <sup>1</sup>	Generally, exempt recipients 1 through 7 <sup>2</sup>

<sup>1</sup>See Form 1099-MISC, Miscellaneous Income, and its instructions.

<sup>2</sup>However, the following payments made to a corporation (including gross proceeds paid to an attorney under section 6045(f), even if the attorney is a corporation) and reportable on Form 1099-MISC are not exempt from backup withholding: medical and health care payments, attorneys' fees, and payments for services paid by a Federal executive agency.

## Part I. Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. If you are a resident alien and you do not have and are not eligible to get an SSN, your TIN is your IRS individual taxpayer identification number (ITIN). Enter it in the social security number box. If you do not have an ITIN, see *How to get a TIN* below.

If you are a sole proprietor and you have an EIN, you may enter either your SSN or EIN. However, the IRS prefers that you use your SSN.

If you are a single-owner LLC that is disregarded as an entity separate from its owner (see *Limited liability company (LLC)* on page 2), enter your SSN (or EIN, if you have one). If the LLC is a corporation, partnership, etc., enter the entity's EIN.

**Note.** See the chart on page 4 for further clarification of name and TIN combinations.

**How to get a TIN.** If you do not have a TIN, apply for one immediately. To apply for an SSN, get Form SS-5, Application for a Social Security Card, from your local Social Security Administration office or get this form online at [www.socialsecurity.gov/online/ss-5.pdf](http://www.socialsecurity.gov/online/ss-5.pdf). You may also get this form by calling 1-800-772-1213. Use Form W-7, Application for IRS Individual Taxpayer Identification Number, to apply for an ITIN, or Form SS-4, Application for Employer Identification Number, to apply for an EIN. You can apply for an EIN online by accessing the IRS website at [www.irs.gov/businesses/](http://www.irs.gov/businesses/) and clicking on Employer ID Numbers under Related Topics. You can get Forms W-7 and SS-4 from the IRS by visiting [www.irs.gov](http://www.irs.gov) or by calling 1-800-TAX-FORM (1-800-829-3676).

If you are asked to complete Form W-9 but do not have a TIN, write "Applied For" in the space for the TIN, sign and date the form, and give it to the requester. For interest and dividend payments, and certain payments made with respect to readily tradable instruments, generally you will have 60 days to get a TIN and give it to the requester before you are subject to backup withholding on payments. The 60-day rule does not apply to other types of payments. You will be subject to backup withholding on all such payments until you provide your TIN to the requester.

**Note.** Writing "Applied For" means that you have already applied for a TIN or that you intend to apply for one soon.

**Caution:** A disregarded domestic entity that has a foreign owner must use the appropriate Form W-8.

## Part II. Certification

To establish to the withholding agent that you are a U.S. person, or resident alien, sign Form W-9. You may be requested to sign by the withholding agent even if items 1, 4, and 5 below indicate otherwise.

For a joint account, only the person whose TIN is shown in Part I should sign (when required). Exempt recipients, see *Exempt From Backup Withholding* on page 2.

**Signature requirements.** Complete the certification as indicated in 1 through 5 below.

**1. Interest, dividend, and barter exchange accounts opened before 1984 and broker accounts considered active during 1983.** You must give your correct TIN, but you do not have to sign the certification.

**2. Interest, dividend, broker, and barter exchange accounts opened after 1983 and broker accounts considered inactive during 1983.** You must sign the certification or backup withholding will apply. If you are subject to backup withholding and you are merely providing your correct TIN to the requester, you must cross out item 2 in the certification before signing the form.

**3. Real estate transactions.** You must sign the certification. You may cross out item 2 of the certification.

**4. Other payments.** You must give your correct TIN, but you do not have to sign the certification unless you have been notified that you have previously given an incorrect TIN. "Other payments" include payments made in the course of the requester's trade or business for rents, royalties, goods (other than bills for merchandise), medical and health care services (including payments to corporations), payments to a nonemployee for services, payments to certain fishing boat crew members and fishermen, and gross proceeds paid to attorneys (including payments to corporations).

**5. Mortgage interest paid by you, acquisition or abandonment of secured property, cancellation of debt, qualified tuition program payments (under section 529), IRA, Coverdell ESA, Archer MSA or HSA contributions or distributions, and pension distributions.** You must give your correct TIN, but you do not have to sign the certification.

## What Name and Number To Give the Requester

For this type of account:	Give name and SSN of:
1. Individual	The individual
2. Two or more individuals (joint account)	The actual owner of the account or, if combined funds, the first individual on the account <sup>1</sup>
3. Custodian account of a minor (Uniform Gift to Minors Act)	The minor <sup>2</sup>
4. a. The usual revocable savings trust (grantor is also trustee)	The grantor-trustee <sup>3</sup>
b. So-called trust account that is not a legal or valid trust under state law	The actual owner <sup>1</sup>
5. Sole proprietorship or single-owner LLC	The owner <sup>3</sup>
For this type of account:	Give name and EIN of:
6. Sole proprietorship or single-owner LLC	The owner <sup>3</sup>
7. A valid trust, estate, or pension trust	Legal entity <sup>4</sup>
8. Corporate or LLC electing corporate status on Form 8832	The corporation
9. Association, club, religious, charitable, educational, or other tax-exempt organization	The organization
10. Partnership or multi-member LLC	The partnership
11. A broker or registered nominee	The broker or nominee
12. Account with the Department of Agriculture in the name of a public entity (such as a state or local government, school district, or prison) that receives agricultural program payments	The public entity

<sup>1</sup> List first and circle the name of the person whose number you furnish. If only one person on a joint account has an SSN, that person's number must be furnished.

<sup>2</sup> Circle the minor's name and furnish the minor's SSN.

<sup>3</sup> You must show your individual name and you may also enter your business or "DBA" name on the second name line. You may use either your SSN or EIN (if you have one). If you are a sole proprietor, IRS encourages you to use your SSN.

<sup>4</sup> List first and circle the name of the legal trust, estate, or pension trust. (Do not furnish the TIN of the personal representative or trustee unless the legal entity itself is not designated in the account title.)

**Note.** If no name is circled when more than one name is listed, the number will be considered to be that of the first name listed.

## Privacy Act Notice

Section 6109 of the Internal Revenue Code requires you to provide your correct TIN to persons who must file information returns with the IRS to report interest, dividends, and certain other income paid to you, mortgage interest you paid, the acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA, or Archer MSA or HSA. The IRS uses the numbers for identification purposes and to help verify the accuracy of your tax return. The IRS may also provide this information to the Department of Justice for civil and criminal litigation, and to cities, states, and the District of Columbia to carry out their tax laws. We may also disclose this information to other countries under a tax treaty, to federal and state agencies to enforce federal nontax criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism.

You must provide your TIN whether or not you are required to file a tax return. Payers must generally withhold 28% of taxable interest, dividend, and certain other payments to a payee who does not give a TIN to a payer. Certain penalties may also apply.



**Borough of Milltown**  
 Zoning Board  
 39 Washington Ave.  
 Milltown, NJ 08850  
 (732)828-2100 ext. 155

## Zoning Board of Adjustment Escrow Deposit

Filed \_\_\_\_\_  
 Hearing \_\_\_\_\_  
 Disposition \_\_\_\_\_  
 Cal. No. \_\_\_\_\_

Name of Applicant \_\_\_\_\_ Block \_\_\_\_\_ Lot \_\_\_\_\_

Applicant E-mail \_\_\_\_\_ Phone Number \_\_\_\_\_

Address of Applicant: \_\_\_\_\_  
Address      Town      State      Zip      Block      Lot

Address of Affected Premise \_\_\_\_\_  
Address      Milltown      Town      Block      Lot

Check Amount \_\_\_\_\_

Check Number \_\_\_\_\_

Escrow Account # \_\_\_\_\_



**Borough of Milltown**  
 Zoning Board  
 39 Washington Ave.  
 Milltown, NJ 08850  
 (732)828-2100 ext. 155

**Property Owners' 200 Ft. List  
 Request Form**

*\$10.00 for each block/ lot*

Filed \_\_\_\_\_  
 Hearing \_\_\_\_\_  
 Disposition \_\_\_\_\_  
 Cal. No. \_\_\_\_\_

Name of Applicant \_\_\_\_\_ Fax Number \_\_\_\_\_

Applicant E-mail \_\_\_\_\_ Phone Number \_\_\_\_\_

Address of Applicant: \_\_\_\_\_  
Address Town State Zip

Address of Affected Premise \_\_\_\_\_  
Address Town Block Lot

Request for List(s) for *(Use one line for each individual Block and Lot):*

- |     |                |       |       |       |     |       |
|-----|----------------|-------|-------|-------|-----|-------|
| 1.  | Street Address | _____ | Block | _____ | Lot | _____ |
| 2.  | Street Address | _____ | Block | _____ | Lot | _____ |
| 3.  | Street Address | _____ | Block | _____ | Lot | _____ |
| 4.  | Street Address | _____ | Block | _____ | Lot | _____ |
| 5.  | Street Address | _____ | Block | _____ | Lot | _____ |
| 6.  | Street Address | _____ | Block | _____ | Lot | _____ |
| 7.  | Street Address | _____ | Block | _____ | Lot | _____ |
| 8.  | Street Address | _____ | Block | _____ | Lot | _____ |
| 9.  | Street Address | _____ | Block | _____ | Lot | _____ |
| 10. | Street Address | _____ | Block | _____ | Lot | _____ |

Please note preferred method of Record Delivery:

- E-mail \_\_\_\_\_
- Fax \_\_\_\_\_
- Mail \_\_\_\_\_

For office Use only

Fee of \$10.00 for each Block/Lot  Cash  Check # \_\_\_\_\_

Date received by the Clerk's Office \_\_\_\_\_  
 Date Completed by the Tax Assessor \_\_\_\_\_  
 Date Forwarded to Board and Applicant \_\_\_\_\_



**Borough of Milltown**  
 Zoning Board  
 39 Washington Ave.  
 Milltown, NJ 08850  
 (732)828-2100 ext. 155

## Zoning Board of Adjustment Tax Clearance Certificate

Filed \_\_\_\_\_  
 Hearing \_\_\_\_\_  
 Disposition \_\_\_\_\_  
 Cal. No. \_\_\_\_\_

Name of Applicant \_\_\_\_\_ Block \_\_\_\_\_ Lot \_\_\_\_\_

Applicant E-mail \_\_\_\_\_ Phone Number \_\_\_\_\_

Address of Applicant: \_\_\_\_\_  
Address Town State Zip Block Lot

Address of Affected Premise \_\_\_\_\_  
Address Town Milltown

### Tax Clearance Certifications

I, Kelly McCormick, Tax Collector of the Borough of Milltown, do hereby certify and affirm that no taxes are due or delinquent on the following block and lots as shown on the Tax Map of the Borough of Milltown.

Block(s) \_\_\_\_\_

Lot(s) \_\_\_\_\_

Taxes paid through \_\_\_\_\_  
 (Year/ Quarter)

Paid on \_\_\_\_\_

\_\_\_\_\_  
 Signature of Tax Collector, Kelly McCormick Date

\_\_\_\_\_  
 Signature of Applicant or Representative Date



**Borough of Milltown**  
 Zoning Board  
 39 Washington Ave.  
 Milltown, NJ 08850  
 (732)828-2100 ext. 155

# Zoning Board of Adjustment Application Fee Calculation Sheet

Filed \_\_\_\_\_  
 Hearing \_\_\_\_\_  
 Disposition \_\_\_\_\_  
 Cal. No. \_\_\_\_\_

Applicant's Name \_\_\_\_\_  
 Applicant E-mail \_\_\_\_\_  
 Applicant Address \_\_\_\_\_  
 Owner's Name \_\_\_\_\_  
 Federal ID # \_\_\_\_\_

Block \_\_\_\_\_ Lot \_\_\_\_\_  
 Applicant Phone Number \_\_\_\_\_  
 Project Name \_\_\_\_\_  
 Owner Address \_\_\_\_\_  
 Date Calculated \_\_\_\_\_

Mark with an X  
 if applicable

**Description**

**Cost**

**Applicant Total**

**A. Subdivisions**

**1. Sketch Plat**

a. Minor Suidivision (3 Lots or Less)


Base Fee \$ 100.00  
 \_\_\_\_\_ X \$20 Per lot \$ -  
 # of Lots

\$	-
\$	-

b. Major Subdivision


Base Fee \$ 250.00  
 \_\_\_\_\_ x \$25 per lot \$ -  
 # of Lots

\$	-
\$	-

c. Submission of Revised Sketch Plat

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\_\_\_\_\_ X .25 \$ -  
*Original Fee*

\$	-
----	---

**2. Preliminary Major Subdivision**

a. Number of Lots

(1) 1 to 5 Lots

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\_\_\_\_\_ X \$100 per lot \$ -  
 # of Lots

\$	-
----	---

(2) Over 5 Lots

--	--

\_\_\_\_\_ X \$200 per lot \$ -  
 # of Lots

\$	-
----	---

b. Extension of Preliminary Plat

--	--

\_\_\_\_\_ x .25 \$ -  
*Original Fee*

\$	-
----	---

c. Submission of Revised Preliminary Plat

--	--

\_\_\_\_\_ X .25 \$ -  
*Original Fee*

\$	-
----	---

**3. Final Major Subdivision**

a. Final Plat

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\_\_\_\_\_ X \$50 per lot \$ -  
 # of Lots

\$	-
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b. Extension of Final Approval

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\_\_\_\_\_ X .25 \$ -  
*Preliminary Subdivision Fee*

\$	-
----	---

c. Submission of Revised Final Plat





**Borough of Milltown**  
 Zoning Board  
 39 Washington Ave.  
 Milltown, NJ 08850  
 (732)828-2100 ext. 155

## Zoning Board of Adjustment Escrow Fee Calculation Sheet

Filed \_\_\_\_\_  
 Hearing \_\_\_\_\_  
 Disposition \_\_\_\_\_  
 Cal. No. \_\_\_\_\_

Applicant's Name \_\_\_\_\_

Block \_\_\_\_\_

Lot \_\_\_\_\_

Applicant E-mail \_\_\_\_\_

Applicant Phone Number \_\_\_\_\_

Applicant Address \_\_\_\_\_

Project Name \_\_\_\_\_

Owner's Name \_\_\_\_\_

Owner Address \_\_\_\_\_

Federal ID # \_\_\_\_\_

Date Calculated \_\_\_\_\_

Mark with an X  
if applicable

Description

Cost

Applicant Total

**A. Variances** *Fees shall be in addition to any site plan approval*

	Description	Cost	Applicant Total
	Use or "D" Variance (40:55D-70D)	\$ 1,000.00	\$ -
	Condition Use Approval (in addition to Site Plan or Subdivision Fees)	\$ 500.00	\$ -

**B. Site Plans** *Fees shall be in addition to any required Variances*

**1. Residential Site Plan (Involving dwelling Units)**

a. Preliminary Site Plan

	Description	Cost	Applicant Total
	1-9 Units	\$ 1,500.00	\$ -
	10-25 Units	\$ 3,000.00	\$ -
	26-50 Units	\$ 4,500.00	\$ -
	51-100 Units	\$ 6,000.00	\$ -
	Over 100 Units	\$ 7,500.00	\$ -

b. Final Site Plan

	Preliminary Fee \$ - x 20%	\$ -	\$ -
	<i>Original Fee</i>	<i>Minimum Deposit of \$1,000</i>	

**2. Non Residential Site Plan (Not involving dwelling units)**

	a. Minor Site Plan	\$ 750.00	\$ -
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b. Preliminary Site Plan

(1) Applications with Principal Buildings over 1000 sf GFA

	Description	Cost	Applicant Total
	1,001 to 2,500 sf GFA	\$ 1,500.00	\$ -
	2,501 to 5,000 sf GFA	\$ 2,500.00	\$ -
	5,001 to 10,000 sf GFA	\$ 4,000.00	\$ -
	10,001 to 15,000 sf GFA	\$ 6,000.00	\$ -
	15,001 to 20,000 sf GFA	\$ 8,000.00	\$ -
	20,001 to 25,000 sf GFA	\$ 10,000.00	\$ -
	25,001 to 100,000 sf GFA	\$ 12,500.00	\$ -
	over 100,000 sf GFA	\$ 15,000.00	\$ -

(2) Applications without Principal Buildings over 1000sf GFA

	lot area up to an acre	\$ 1,000.00	\$ -
	1 to 5 acres	\$ 2,000.00	\$ -
	5 to 10 acres	\$ 3,000.00	\$ -
	over 10 acres	\$ 4,000.00	\$ -

c. Final Site Plan

	Preliminary Fee	\$ -	x 20%	\$ -	\$ -
		<i>Original Fee</i>		<i>Minimum Deposit of \$1,000</i>	

**C. Subdivisions**

	1. Minor Subdivision (3 Lots or Less)	\$ 100.00	\$ -
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2. Preliminary Subdivision

	4 to 10 Lots	\$ 2,000.00	\$ -
	11 to 25 Lots	\$ 3,000.00	\$ -
	26 to 50 Lots	\$ 4,000.00	\$ -
	51 to 100 Lots	\$ 6,000.00	\$ -
	Over 100 Lots	\$ 7,500.00	\$ -

3. Final Subdivision

	4 to 25 Lots	\$ 1,000.00	\$ -
	26 to 100 Lots	\$ 2,000.00	\$ -
	Over 100 Lots	\$ 3,000.00	\$ -

**D. Planned Unit Development (P.U.D.)**

Fees shall be as for simultaneous major site plan and major subdivision application, with fees for residential and nonresidential development computed separately and hereafter cumulatively assessed upon the applicant

**E. Concept Plans**

	1. Minor Subdivision or Minor Site Plan	\$ 100.00	\$ -
	2. Major Subdivision	\$ 500.00	\$ -
	3. Site Plan involving over 1,001 sf GFA	\$ 500.00	\$ -
	4. Planned Unit Development or Use Variance	\$ 500.00	\$ -

**F. General Development Plan**

	Base Fee	\$ 1,000.00	\$ -
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In addition to any other site plan and/ or subdivision fees that may also be required

**G. Resubmissions**

For each submission of revised plans, including use variance, preliminary and final subdivision, preliminary and final site plan, and P.U.D. Applications

	Resubmission	x 20%	\$ -	\$ -
		<i>Original Fee</i>		

**H. Special Design Elements**

When Determined Applicable by the Reviewing Board

	Special Design Elements	x 20%	\$ -	\$ -
		<i>Original Fee</i>		

**I. Escrow Amounts**

	Total Original Escrow Fee Due	\$ -
	Original Escrow Fee Submitted by Applicant	
	Balance of Revised Escrow Still Due	

**J. Revised Escrow Amounts**

	Revised Submission Escrow Fee Due	
	Revised Submission Escrow Fee Submitted by Applicant	
	Balance of Revised Escrow Fee Still Due	



**Borough of Milltown**  
 Zoning Board  
 39 Washington Ave.  
 Milltown, NJ 08850  
 (732)828-2100 ext. 181

## Zoning Board Variance Sketch Checklist

Filed \_\_\_\_\_  
 Hearing \_\_\_\_\_  
 Disposition \_\_\_\_\_  
 Cal. No. \_\_\_\_\_

Name of Applicant \_\_\_\_\_ Block \_\_\_\_\_ Lot \_\_\_\_\_

Applicant E-mail \_\_\_\_\_ Phone Number \_\_\_\_\_

Address of Applicant: \_\_\_\_\_  
Address Town State Zip Block Lot

Name of Owner \_\_\_\_\_ Block \_\_\_\_\_ Lot \_\_\_\_\_

Owner E-mail \_\_\_\_\_ Phone Number \_\_\_\_\_

Address of Owner: \_\_\_\_\_  
Address Town State Zip Block Lot

Address of Affected Premise \_\_\_\_\_  
Address Milltown NJ 08850  
 Town State Zip

### Checklist

Included	Item	Adequate	Deficient
	Key Map: Site Location, 200' radius, adjacent proper		
	Adjacent property and property lines within 200'		
	Owner's Name and Address		
	Applicant's Name and Address		
	Preparer's Name and Address		
	Lot lines and dimensions		
	Zoning setback lines		
	Proposed existing and proposed structures and dimensions		
	Adjoining lands owned by owner and/or applicant		
	Existing water mains and proposed water connection locations		
	Location and width of all curb cuts and driveways		
	Location, dimensions, and street access for off-street parking spaces		
	Locations and size of proposed landscaping		
	Location of existing sanitary sewer lines and proposed sanitary sewer connections		
	All existing and proposed curbs and sidewalks		
	Building off-set dimensions from each property line to nearest adjoining structure on each side yard		
	If subdivision or site plan approval is necessary provide appropriate checklists		
	Other information as may be required by the Board.		
	A digital copy of each document or plan submitted in .pdf format. The digital submission shall be made on a CD, DVD, USB Drive, or via email to the Administrative Officer.		

Notes: \_\_\_\_\_



**Borough of Milltown**  
 Zoning Board  
 39 Washington Ave.  
 Milltown, NJ 08850  
 (732)828-2100 ext. 181

**Zoning Board**  
**Approval of Variance**  
**Application**  
Must be filed in Duplicate (2)

Filed \_\_\_\_\_  
 Hearing \_\_\_\_\_  
 Disposition \_\_\_\_\_  
 Cal. No. \_\_\_\_\_

Name of Applicant \_\_\_\_\_ Block \_\_\_\_\_ Lot \_\_\_\_\_

Applicant E-mail \_\_\_\_\_ Phone Number \_\_\_\_\_

Address of Applicant: \_\_\_\_\_  
Address Town State Zip Block Lot

Name of Owner \_\_\_\_\_ Block \_\_\_\_\_ Lot \_\_\_\_\_

Owner E-mail \_\_\_\_\_ Phone Number \_\_\_\_\_

Address of Owner: \_\_\_\_\_  
Address Town State Zip Block Lot

Address of Affected Premise \_\_\_\_\_  
Address Milltown NJ 08850  
 Town State Zip

This appeal is based on the order issued by the Building Official dated \_\_\_\_\_ (copy to be furnished by Building Official)

**1. Variance Sketch**

Submit with your application a drawing, which reasonably physically represents the appearance of the renovated interior of the structure affected together with a drawing, which reasonable represents the appearance of the exterior elevations after completion of the proposed renovation. In addition, you must submit a sketch survey of your property and a plot plan. You may draw your own sketches.

\_\_\_\_\_  
 Name of Preparer Company (If Applicable)

\_\_\_\_\_  
 Phone Number E-mail

Address of Preparer \_\_\_\_\_  
Street Address Town State Zip

**2. Proposal Information**

**Current Zone of Property**

R-18     R-10     R-8     R-6     R-4  
 B-1     B-2     B-3     M-1

**Proposed Use of Property** \_\_\_\_\_

**Is this use permitted in the zone?** \_\_\_\_\_

Lot Area (sq. ft.)	_____
Lot Width (feet)	_____
Lot Depth (feet)	_____
Building Setbacks from Property Lines (feet)	Front _____ Side(s) _____ Rear _____
Building Height	Stories _____ Feet _____
Percentage of Lot Occupied by Building	_____
Percentage of Lot Covered by Impervious Surface	_____

Has there been any previous appeal involving these properties?

Yes

No

If so, state charter of appeal \_\_\_\_\_ Date of disposition \_\_\_\_\_

**3. Conditions**

In order to grant a variance for deviation from bulk standards, the law requires that justification in accordance with the standards at N.J.S.A. 40:55D-70.c must be established. There are two means to justify variance relief, commonly known as “c(1) hardship” and “c(2) broad” standards. Please provide answers to in full to either section A or B below:

A. C(1) Hardship Standard – Please provide a statement addressing the following below.

1. Due to the size, shape, topography or some other feature of the property or by reason of an extraordinary and exceptional situation uniquely affecting the specific piece of property and the structures legally on it, strict application of the provisions of the Zoning Ordinance would result in practical difficulties or unnecessary hardships inconsistent with its general purpose and intent.

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2. That the granting of a Variance can be made without substantial detriment to the public good and will not substantially impair the intent and purpose of the zoning plan and zoning ordinance.

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B. C(2) Broad Standard – Please provide a statement addressing how the purposes of zoning at N.J.S.A. 40:55D-2 would be advanced by the proposed application, and how the benefits would substantially outweigh any potential detriment.

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In order to grant a variance to permit a use that is not permitted, the expansion of a non-conforming use, non-compliance with conditional use standards, excessive density or floor area ratio, or proposed height in excess of what is permitted by greater than 10%, the law requires that justification in accordance with the standards at N.J.S.A. 40:55D-70.d must be established. A showing must be made that the “positive criteria” and “negative criteria” are satisfied.

A. Positive Criteria – Demonstrate that a Hardship exists because the property cannot be developed with a permitted use OR that the proposed use inherently serves the public good OR that the proposed use advances the purposes of zoning at N.J.S.A. 40:55D-2, and that the site is particularly suitable for the proposed use:

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B. Negative Criteria – Demonstrate that there will be no substantial detriment to the public good AND that the granting of a use variance is no inconsistent with the intent and purpose of the master plan and zoning ordinance:

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**4. Certification**

Certification is hereby made that to the best of the signers knowledge the proposed subdivision is not contrary to any ordinance governing subdivision of land, nor zoning, nor the rules and regulations of the Zoning Board, nor the Master Plan in effect in the Borough of Milltown, County of Middlesex, State of New Jersey.

**The undersigned have been duly sworn according to law deposes and says that all of the above statements are true.**

Stamp of Notary Public

\_\_\_\_\_ Signature of Applicant

\_\_\_\_\_ Address of Applicant

Sworn and Subscribed to me on this  
\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_

\_\_\_\_\_  
Signature of Notary Public

**IMPORTANT NOTES:**

- Failure to answer any of the above questions shall **VOID** this application and it shall be disapproved.
- Before Approval may be given the requirements of N.J.S.A. 40:55-1-7 regarding notice must be complied with by applicant. Proof of such notice in affidavit form must be submitted to the Borough Clerk at least ten (10) days prior to date of scheduled hearing with application fee of \$100.00.
- Complete the “Notice of Hearing” form and serve to all property owners within 200 feet of your property either by certified mail or by personal service. If you choose personal service you are required to complete “Property Owners Served” form and “Affidavit of Service” form after you have completed service and return same to the municipal clerk. The “Notice of Hearing” must be served at least ten (10) days prior to your appearance before the zoning board of adjustment.
- The “Notice of Hearing” must also be published in the home news publishing company, once at least ten (10) days prior to your appearance before the zoning board of adjustment. An “Affidavit of Publication” must be obtained from the home news and the same filed with the municipal clerk.

**Office Use only**

Date Received by Clerk \_\_\_\_\_ Date Submitted to Zoning Board \_\_\_\_\_