

# Form 01/Board Application

TOWNSHIP OF CRANFORD - ZONING DEPARTMENT

8 Springfield Avenue - Cranford, NJ 07016

Phone: (908) 709-7216 • Fax: (908) 276-7664

Email: [Zoning@CranfordNJ.org](mailto:Zoning@CranfordNJ.org)



Form Updated 10-12

The application, with supporting documentation, must be filed with the Planning and Zoning Department of the Township, and will be reviewed by Township professionals prior to scheduling the meeting at which the application is to be considered.

## To Be Completed by Township Staff Only

Dated Received: \_\_\_\_\_

Application No.: \_\_\_\_\_

## To Be Completed by Applicant

### 1. Subject Property

Location/Address: 545A & 549 Lexington Avenue  
Tax Map: Block: 457, Lot(s): 8  
Block: 457, Lot(s): 9  
Dimensions: Frontage: 242' Depth: 291' Total Area: \_\_\_\_\_  
Zoning District: \_\_\_\_\_

### 2. Applicant Information

Name: J. Tan & M. Toq, LLC  
Address: 320 North Avenue East Cranford  
Phone: 908-276-2715 Email: victorv@hcicq.net

Applicant is a: Corporation \_\_\_\_\_ Partnership \_\_\_\_\_ Individual \_\_\_\_\_

Limited Liability Company  Other (Specify) \_\_\_\_\_

### 3. Disclosure Statement

Pursuant to N.J.S.A. 40:55D-48.1, the names and addresses of all persons owning 10% of the stock in a corporate applicant or 10% interest in any partnership applicant must be disclosed. In accordance with N.J.S.A. 40:55d-48.2 that disclosure requirement applies to any corporation, limited liability company or partnership which owns more than 10% interest in the applicant followed up the chain of ownership until the names and addresses of the non-corporate

stockholders and partners exceeding the 10% ownership criterion have been disclosed. [Attach pages as necessary to fully comply.]

Name(s) Address(es)  
Lynn Vinegra 320 North Ave E Cranford 99%

4. If Owner is other than the Applicant -  
Please provide the following information on the Owner(s):

Owner's Name: Lot # 8 Peter Crane  
Address: 549 Lexington Avenue Cranford  
Telephone Number: 908-665-6846

5. Property Information:

Present use of the premises: Commercial  
Restrictions, covenants, easements, association by-laws, existing or proposed on the property:  
Yes [attach copies]: \_\_\_\_\_ No:   
Proposed use of the premises: Residential Townhomes

**NOTE: All deed restrictions covenants, easements, and association by-laws, existing and proposed, must be submitted for review and must be written in easily understandable English.**

6. Licensed professionals representing the Applicant before the Board (if any):

- A. Attorney's Name: Gary Goodman  
Address: 112 Miln Street  
City/State/ZIP: Cranford NJ 07016  
Phone Number: 908-272-6900  
E-mail: garysgoodmanesq@hotmail.com
- B. Planner's Name: Katherine O'Kane Sarmad  
Address: 320 North Ave East  
City/State/ZIP: Cranford NJ  
Phone Number: 908 276 2715  
E-mail: Katherin O @ hci cg . net
- C. Engineer's Name: Anthony Gallerano PE  
Address: 320 North Ave East  
City/State/ZIP: Cranford NJ  
Phone Number: 908 276 2715 ext 124  
E-mail: Tony g @ hci cg . net

D. List any other Expert who will submit a report or will testify for the Applicant:  
[Attach Additional sheets as may be necessary.]

Name: \_\_\_\_\_  
Area of Expertise: \_\_\_\_\_  
Address: \_\_\_\_\_  
City/State/ZIP: \_\_\_\_\_  
Phone Number: \_\_\_\_\_  
E-mail: \_\_\_\_\_

**7. Application Type**

A. SUBDIVISION

- \_\_\_\_\_ Minor Subdivision Approval  
\_\_\_\_\_ Subdivision Approval [Preliminary]  
\_\_\_\_\_ Subdivision Approval [Final]

B. SITE PLAN

- \_\_\_\_\_ Minor Site Plan Approval  
\_\_\_\_\_ Preliminary Site Plan Approval [Phases (if applicable)]  
\_\_\_\_\_ Final Site Plan Approval [Phases (if applicable)]  
\_\_\_\_\_ Amendment or Revision to an Approved Site Plan  
 Request for waiver from Site Plan review and approval

Reason requesting waiver of site plan approval (use additional pages if necessary):

We are requesting a bifurcated application.  
This project is for a USE Variance  
for an Age-Restricted Townhouse development.  
Cransford's Ordinance does not permit  
Age Restricted Townhomes  
This is a USE Variance Application

C. INFORMAL REVIEW: \_\_\_\_\_ Subdivision \_\_\_\_\_ Site Plan

D. CONDITIONAL USE APPROVAL per N.J.S.A. 40:55D-67

E. DIRECT ISSUANCE OF A PERMIT:

- \_\_\_\_\_ N.J.S.A. 40:55D-34 (permit building or structure in the bed of a mapped Street or public drainage way, flood control basin or public area reserved pursuant to N.J.S.A. 40:55D-32)  
\_\_\_\_\_ N.J.S.A. 40:55D-36 (permit building or structure not related to an official suitably improved street pursuant to N.J.S.A. 40:55D-35).

F. VARIANCES PURSUANT TO N.J.S.A. 40:55D-70.C

- \_\_\_\_\_ (C1) "Hardship" Variance
- \_\_\_\_\_ (C2) "Flexible" Variance (benefits v. detriments)

G. VARIANCES PURSUANT TO N.J.S.A. 40:55D-70.D

- X \_\_\_\_\_ (D1) A use or principal structure in a district restricted against such use or principal structure
- \_\_\_\_\_ (D2) An expansion of a nonconforming use
- \_\_\_\_\_ (D3) Deviation from a specification or standard pursuant to Section 54 of P.L. 1975, c.291 (C.40:55D-67) pertaining solely to a conditional use
- \_\_\_\_\_ (D4) An increase in the permitted floor area ratio as defined in Section 3.1 of P.L. 1975, c.291 (C.40:55D-4)
- \_\_\_\_\_ (D5) An increase in the permitted density as defined in Section 3.1 of P.L. 1975, c.291 (C.40:55D-4) except as applied to the required lot area for a lot or lots for detached one or two dwelling unit buildings which lot or lots are either an isolated undersized lot or lots resulting from a minor subdivision.
- \_\_\_\_\_ (D6) A height of a principal structure which exceeds by 10 feet or 10% the maximum height permitted in the district for a principal structure.

H. APPEAL/INTERPRETATION PURSUANT TO N.J.S.A. 40:55D-70, (a) & (b):

- \_\_\_\_\_ (a) Appeal to Board of Adjustment of Order, Requirement, Decision or Refusal by an administrative officer based on or made in the enforcement of the zoning ordinance.
- \_\_\_\_\_ (b) Request for Interpretation of the zoning map or ordinance or for Decisions upon other special questions upon which the Board of Adjustment is authorized to pass by any zoning or offered map or ordinance.

8. **Explain in detail** the exact nature of the application and the changes to be made at the premises, including the proposed use of the premises: [attach additional pages if needed]

The Two existing lots have been used as commercial uses for over 50 years. The applicant is seeking to develop the lots as a Residential use.

The proposed uses shall be age-restricted townhomes. Our Planning studies identified that simple townhomes are well under represented in the Township of Cranford. Each townhome shall contain individual elevators for handicap & older citizens

9. Is a public water line available? yes
10. Is public sanitary sewer available? yes
11. Does the application propose a well and septic system? no
12. Have any proposed new lots been reviewed with the Tax Assessor to determine appropriate lot and block numbers? no
13. Are any off-tract improvements required or proposed? no
14. Is the subdivision to be filed by Deed or Plat? n/a
15. What form of security does the applicant propose to provide as performance and maintenance guarantees? bonds
16. Other approvals which may be required and date plans submitted:

Yes	No	Date Plans Submitted
<input checked="" type="checkbox"/>		
<input checked="" type="checkbox"/>		
<input checked="" type="checkbox"/>		
<input checked="" type="checkbox"/>		
<input checked="" type="checkbox"/>		

The agencies listed below will be applied to if approved. Per the MLUL any outside approvals will be contingent upon Cranford's Board of Adjustment approval.

17. List of maps, reports and other materials accompanying the application (attach additional pages as required for complete listing.)

Quantity	Description of Item
_____	_____
_____	_____
_____	_____
_____	_____

18. The Applicant hereby requests that copies of the reports of the professional staff reviewing the application be provided to the following of the applicant's professionals.

Specify which reports are requested for each of the applicant's professionals or whether all reports should be submitted to the professional listed.

Reports Requested:

Send reports to:

Planning

Name/Address Katherine Sarmad

320 North Avenue East  
Cranford

Fire/Police

Name/Address Same as above

\_\_\_\_\_

Name/Address \_\_\_\_\_

\_\_\_\_\_

# Certifications

Complete #19 *or* #20 a and b as indicated:

**19. Applicant is Property Owner:** I certify that I am the Owner of the property which is the subject of this application, for which I am also the Applicant, and that the foregoing statements and the materials submitted are true. As such, I further certify that I am authorized to sign this application, and that I agree to be bound by the application and the decision. [If the Owner who is also the Applicant is a corporation this must be signed by an authorized corporate officer. If the Owner who is also the Applicant is a partnership, this must be signed by a general partner.]

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

\_\_\_\_\_  
NOTARY PUBLIC

\_\_\_\_\_  
SIGNATURE OF APPLICANT and OWNER

**20. a) Applicant Who is Not the Property Owner:** I certify that the foregoing statements and materials submitted are true. I further certify that I am the individual applicant or that I am an Officer of the Corporate applicant and that I am authorized to sign the application for the Corporation or that I am a general partner of the partnership applicant. [If the Applicant is a corporation this must be signed by an authorized corporate officer. If the Applicant is a partnership, this must be signed by a general partner.]

Sworn to and subscribed before me this  
8<sup>th</sup> day of JUNE, 2023

Anne M. DeWalt  
NOTARY PUBLIC

Lynn Vinegra  
SIGNATURE OF APPLICANT  
Lynn Vinegra

**b) Owner Who is Not the Applicant:** I certify that I am the Owner of the property which is the subject of this application, that I have authorized the Applicant to make this application and that I agree to be bound by the application, the representations made and the decision in the same manner as if I were the Applicant. [If the Owner is a corporation this must be signed by an authorized corporate officer. If the Owner is a partnership, this must be signed by a general partner.]

Sworn to and subscribed before me this  
12<sup>th</sup> day of June, 2023

Anne M. DeWalt  
NOTARY PUBLIC

Peter Crane Pres.  
SIGNATURE OF OWNER  
Peter Crane

## Checklist Certification

**21. To be completed by the applicant:** I certify that all of the required checklist items and any waiver requests (which includes a listing of each waiver requested and a statement of arguments in support of granting each waiver requested) have been provided as part of this application. I understand that a determination of completeness is not a determination of approval and that the Board of jurisdiction has the right to request additional information. [If the Applicant is a corporation this must be signed by an authorized corporate officer. If the Applicant is a partnership, this must be signed by a general partner.]

Sworn to and subscribed before me this  
8<sup>th</sup> day of June, 2023

[Signature]  
NOTARY PUBLIC

Lynn Vinegra  
SIGNATURE OF APPLICANT  
Lynn Vinegra

## Escrow Certification

**21. Escrow Certification** I (*please print name*) Lynn Vinegra understand that I have provided the non-refundable sum of \$ 0 to be deposited in a Township of Cranford escrow account. In accordance with the Ordinances of the Township of Cranford, I further understand that the escrow account is established to cover the cost of professional services including but not limited to engineering, planning, legal and other expenses associated with the review of submitted materials and the publication of the decision by the Board. Sums not utilized in the review process shall be returned upon my written request to the Zoning Department for same. If additional sums are deemed necessary, I understand that I will be notified of the required additional amount and shall add that sum to the escrow account within fifteen (15) days.

Lynn J. Vinegra  
SIGNATURE OF APPLICANT

6/27/23  
DATE



TAX STATEMENT

22. Applicant is to complete and sign form, and bring it to the Cranford Township Tax Collector for signature. If you would like the signed form returned to you by mail, please provide a self-addressed, stamped envelope for same. One copy of the signed Tax Statement should be included in each of the eighteen completed sets of Form 01.

I, Lynn Vinegra of 545A Lexington Avenue  
Name Address

am submitting an application to the

PLANNING BOARD  ZONING BOARD OF ADJUSTMENT

for the development of Block 457 Lot 9 in Zone \_\_\_\_\_

located at 545 A Lexington Ave Cranford  
Address

The owner of record is Lynn Vinegra of 545A Lexington Ave  
Name Address Cranford

I acquired interest in this property on 3/1/2017 and request the Tax  
Date

Collector to determine whether or not there are any delinquent taxes or other assessments due.

Lynn Vinegra  
Applicant's Signature

6/27/23  
Date

TO BE COMPLETED BY TAX COLLECTOR

- All taxes due have been paid.
- All assessments due have been paid.
- The following are delinquent and past due:  
*I verify that this information accurately reflects municipal tax records.*



[Signature]  
Tax Collector

Cranford Township  
Union County Tax Collector's Signature



6/29/2023  
Date

TAX STATEMENT

22. Applicant is to complete and sign form, and bring it to the Cranford Township Tax Collector for signature. If you would like the signed form returned to you by mail, please provide a self-addressed, stamped envelope for same. One copy of the signed Tax Statement should be included in each of the eighteen completed sets of Form 01.

I, Lynn Vinegra of 545A & 549 Lexington Avenue Cranford  
Name Address

am submitting an application to the

PLANNING BOARD  ZONING BOARD OF ADJUSTMENT

for the development of Block 457 Lot 8 in Zone R-1

located at 549 Lexington Avenue Cranford  
Address

The owner of record is Reel Strong Fuel Co. of 549 Lexington  
Name Address

I acquired interest in this property on 1/9/25 and request the Tax  
Date

Collector to determine whether or not there are any delinquent taxes or other assessments due.

Lynn Vinegra  
Applicant's Signature

6/27/23  
Date

TO BE COMPLETED BY TAX COLLECTOR

- All taxes due have been paid.
- All assessments due have been paid.
- The following are delinquent and past due:



verify that this information accurately reflects municipal tax records.

[Signature]  
Tax Collector  
Cranford Township  
Union County Tax Collector's Signature



6/29/2023  
Date

# Form 05/Use Variance Application

TOWNSHIP OF CRANFORD - ZONING DEPARTMENT

8 Springfield Avenue - Cranford, NJ 07016  
Phone: (908) 709-7216 • Fax: (908) 276-7664



Form Updated 8-12

## To be completed by Township Staff Only

Application No.: \_\_\_\_\_ Date received: \_\_\_\_\_

Request is hereby made pursuant to Section 40:55D-70(d) of the New Jersey Municipal Land Use Law to the Board for permission to permit as a use in       R-1       Zone which is specifically prohibited by the Municipal Land Use Ordinance of the Township of Cranford.

### 1. Arguments must be submitted in support of the requested "Use Variance."

On a separate sheet, describe reasons why the requested use variance should be granted by the Board.

### 2. Public Hearing Notification Information

Notice shall be given by the applicant at least ten (10) days prior to the date of the hearing to the following parties where applicable. Notice shall be by personal service or certified mail. An affidavit of proof of service demonstrating compliance with this requirement shall be filed with the Board Administrator in the Planning/Zoning Department at least four (4) business days prior to the date of the hearing.

#### Please circle responses:

- a) Is the subject property located within two hundred feet (200') of any municipal boundary? If yes, City Clerk of adjacent municipality and County Planning Board shall be notified of hearing by applicant. (Note 1)    YES  NO
- b) Is the subject property adjacent to an existing or proposed county road or adjoining other County Land?    YES  NO If yes, County Planning Board shall be notified of hearing by applicant. (Note 1)
- c) Is the subject property adjacent to a State Highway?    YES  NO If yes, applicant shall notify the Commissioner of Transportation of the hearing. (Note 2, Form No. 13)
- d) Is the subject property greater than one hundred fifty (150) acres or involve more than 500 dwelling units?    YES  NO If yes, applicant shall notify the Director of New Jersey State Planning Commission of the hearing. Notice shall include a copy of any maps or documents required to be on file with the Municipal Clerk. (Note 3)

THE APPLICANT SHALL NOTIFY ALL OWNERS OF PROPERTY LOCATED WITHIN TWO HUNDRED FEET (200') IN ALL DIRECTIONS OF THE PROPERTY IN QUESTION AND OTHERS AS REQUIRED.

### 3. Disclosure Information

Is applicant and/or owner a corporation, limited liability company or partnership and does the application involve variances to construct a multiple dwelling of twenty-five (25) or more family units or approval of a site to be used for commercial purposes? YES  NO  
If yes, submit disclosure of all stockholders holding ten percent (10%) or greater interest in the partnership pursuant to N.J.S.A. 40:55D-48.1 et.seq.

#### NOTES:

- “1” Union County Planning Board  
Attn: Union County Department of Engineering and Planning  
Union County Administration Building, Elizabethtown Plaza  
Elizabeth, New Jersey 07207
- “2” New Jersey Department of Transportation  
1035 Parkway Avenue  
P.O. Box 600  
Trenton, NJ 08625
- “3” New Jersey State Planning Commission  
150 West State Street  
P.O. Box 204  
Trenton, New Jersey 08625



## **Use Variance and Proposal Summary**

554A and 559 Lexington Avenue  
Block 457, Lots 8 and 9

The Applicant is seeking use variance relief for the property located at 554A and 559 Lexington Avenue, otherwise known as Block 457, Lots 8 and 9 in the Township of Cranford. The property is sited in the southern portion of the Township, and Block 8 has frontage on Lexington Avenue at its terminus with the railroad right-of-way that transects Walnut Avenue. Block 9 is presently landlocked with no access to a right-of-way. The site is developed with a single-story building and multi-bay garage, is largely covered by impervious pavement, and utilized for non-residential purposes – including storage of materials and vehicles for contractor businesses.

The subject property is located in the R-1 “One Family Detached Residence District”, where single-family residences are a permitted use. Surrounding the property is the C-3 zone to the south across the railroad tracks, the R-3 zone to the north across the Lexington Avenue right-of-way, and a mixture of R-1 and R-3 zoning to the north and west.

The Applicant seeks to construct twenty-six (26) age-restricted, for-sale townhouse units – including fourteen (14) 2-bedroom and twelve (12) 3-bedroom units. Attached residences are not permitted in the R-1 zone as set forth in Section 255-36.A, and thus D(1) Use Variance relief is requested.

This application is proposed as “bifurcated” - meaning that it is only an application for the “D” Use Variance, and there will be a separate application for a subsequent engineered site plan if the use variance is granted. Despite the bifurcation, the Applicant requests relief from variance conditions of the bulk standards for the following: 1) minimum front yard setback, where 35 feet is required and 30 feet is proposed; 2) minimum rear yard setback where 171.4 feet is required and 18.5 feet is proposed; 3) minimum side yard setback (one side), where 10% of the lot width, or 24.2 feet, is required and 8.4 feet is proposed; 4) minimum side yard setback (both sides), where 30% of the lot width, or 72.6 feet, is required and 20.5 feet is proposed; 5) maximum impervious lot coverage, where 35% is permitted, or 27,284 square feet, and 53.2%, or 41,433.7 square feet, is proposed; 6) maximum building coverage, where 25%, or 19,489 square feet, is permitted and 29.1%, or 22,715 square feet, is proposed; 7) maximum building height, where 2.5 stories and 32 feet is permitted and 3 stories and 37.8 feet is proposed; and 8) minimum distance to a railroad or GSP is required to be 100 feet, whereas 71.4 feet is proposed. Testimony in support of the request for variance relief will be provided at the time of the hearing.

The Township Zoning Ordinance principally permits townhouses (as “attached 1-family homes”) in the R-6 zone, and conditionally permits them in R-5 and R-7 zones. Presently, there are eleven (11) total parcels zoned R-6 in the Township – of these, nine (9) are located near the Downtown along North Avenue or Springfield Avenue, and are largely developed here with the exception of two (2) properties which are owned by Union County Parks and Recreation and the Township (Block 262, Lot 1 and Lot 3.01); and the other two (2) parcels are located between Lambert Street and the Garden State Parkway (adjacent to Adams Park) and are undeveloped and also owned by

the Township (Block 326, Lot 1 and Block 327, Lot 1). Townhouse development standards are prescribed further under Section 255-37.C.

While there are existing townhouse units within the Township, there are no age-restricted townhouse units within the Township limits. A market analysis of the Township and surrounding area within Union County provides that there is a gap in housing diversity within this region for age-restricted, for-sale townhouse units. The unit type as well as the design of the units, has been carefully thought out to help fill the gap in age-restricted, for-sale units within the Township. For example, the units include elevators that will be maintained by the homeowner's association. This housing type will provide an opportunity for Cranford residents to downsize while still of working-age, and by the design of these units, to "age in place" in the community that they have lived in and been a part of rather than relocate elsewhere. Additionally, by law, age-restricted units do not permit school-aged children, which reduces the impact on schools and municipal services. Finally, the project will provide an affordable housing set-aside of 4 units.

**Hold Harmless And Indemnification Agreement**

FORM 15/Updated 4/09

This agreement made this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, witnesses:

WHEREAS, J. Tan & M. Tog, Applicant, has submitted an application to the Zoning (Board) of the Township of Cranford with said application designated as Application No. \_\_\_\_\_; and

WHEREAS, it may be necessary for the members of the Zoning (Board) to inspect and walk the subject property known as 545A & 549 Block 457, Lot 8 & 9; and

WHEREAS, the Zoning (Board) deems it advisable and fiscally prudent to obtain permission from the individual applicants for the members inspection of said property and to preclude claims for alleged damage in connection with the inspection;

NOW, THEREFORE, BE IT RESOLVED, in consideration of the mutual promises and covenants made by and between the parties, and is hereby agreed as follows:

I, J. Tan m. Tog, Applicant, shall indemnify and hold harmless the Zoning (Board) with regard to claims for damages associated with the inspection and shall preclude claims for alleged damage in connection with the inspection and give my permission for members of said Board to walk the property listed above.

Lynn Vinegra  
\_\_\_\_\_  
Lynn Vinegra  
Signature of Applicant

Sworn and subscribed to before me  
this 8th day of June, 2023

Anne Mullenbelle  
\_\_\_\_\_

Notary Public of the State of New Jersey  
My Commission Expires on May 2, 2025

## Request for Taxpayer Identification Number and Certification

Give Form to the  
 requester. Do not  
 send to the IRS.

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.  
**Lynn Vinegra**

2 Business name/disregarded entity name, if different from above  
**J. Tan & M. Toq, LLC**

3 Check appropriate box for federal tax classification; check only one of the following seven boxes:  
 Individual/sole proprietor or single-member LLC  
 Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶ \_\_\_\_\_  
 C Corporation  
 S Corporation  
 Partnership  
 Trust/estate  
 Other (see instructions) ▶ \_\_\_\_\_

4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):  
 Exempt payee code (if any) \_\_\_\_\_  
 Exemption from FATCA reporting code (if any) \_\_\_\_\_  
*(Applies to accounts maintained outside the U.S.)*

5 Address (number, street, and apt. or suite no.)  
**320 North Avenue**

6 City, state, and ZIP code  
**Cranford NJ**

7 List account number(s) here (optional)

Requester's name and address (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 generally 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.

<b>Social security number</b>								
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%; border: 1px solid black; height: 20px;"></td> <td style="width: 25%; border: 1px solid black; height: 20px;"></td> <td style="width: 25%; border: 1px solid black; height: 20px;"></td> <td style="width: 25%; border: 1px solid black; height: 20px;"></td> </tr> <tr> <td style="text-align: center;">-</td> <td style="text-align: center;">-</td> <td style="text-align: center;">-</td> <td style="text-align: center;">-</td> </tr> </table>					-	-	-	-
-	-	-	-					
<b>or</b>								
<b>Employer identification number</b>								
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%; border: 1px solid black; height: 20px; text-align: center;">22</td> <td style="width: 25%; border: 1px solid black; height: 20px; text-align: center;">-</td> <td style="width: 25%; border: 1px solid black; height: 20px; text-align: center;">3411</td> <td style="width: 25%; border: 1px solid black; height: 20px; text-align: center;">559</td> </tr> </table>	22	-	3411	559				
22	-	3411	559					

**Note.** If the account is in more than one name, see the instructions for line 1 and the chart on page 4 for guidelines on whose number to enter.

### Part II Certification

- Under penalties of perjury, I certify that:
- 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
  - 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
  - I am a U.S. citizen or other U.S. person (defined below); and
  - The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

**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 3.

**Sign Here**      Signature of U.S. person ▶ **Lynn J Vinegra**      Date ▶ **6/27/23**

### General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.  
**Future developments.** Information about developments affecting Form W-9 (such as legislation enacted after we release it) is at [www.irs.gov/fw9](http://www.irs.gov/fw9).

#### Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following:

- Form 1099-INT (interest earned or paid)
- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)

- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
  - Form 1099-C (canceled debt)
  - Form 1099-A (acquisition or abandonment of secured property)
- Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

*If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See **What is backup withholding?** on page 2.*

- By signing the filled-out form, you:
- Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
  - Certify that you are not subject to backup withholding, or
  - Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income, and
  - Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See **What is FATCA reporting?** on page 2 for further information.



545A & 549  
Lexington Ave

Address of Property: \_\_\_\_\_

**Checklist 5. Required items for "D" (a.k.a "use") variance applications pursuant to NJSA 40:55D-70d.**

Item Number	Required Item	To be completed by applicant.		To be completed by the Planning and Zoning Office.	
		Provided ("P") or Waiver Requested ("W")	Applicant Initials	Date item received by Planning and Zoning Office	Zoning Officer initials
1.	One original and 17 copies of the Use Variance Request application form (Form 05).	P	V.V.		
2.	One original and 17 copies of the plans detailing all existing and proposed conditions.	P	V.V.		
3.	One original and 17 copies of any approved site plans for the subject property.	W	V.V.		
4.	If the proposed use is not a single or two family use, all plans must be prepared by a New Jersey licensed design professional.				