

Proposed Use

9. Proposed activity:

- New Building
- Change of use (new tenant, different use)
- Change of occupancy (new tenant, same use)
- Extending, Enlarging or Renovating existing tenant space
- Home Professional Office/Home Occupation

10. Square Footage of Proposed Tenant Space: _____

If adding space, what was the original square footage? _____ Additional? _____

11. Describe the scope and purpose of the proposed activity, the nature of the operation, its processes and access to the public. Include a flow diagram or other illustration, if appropriate.

12. You **must** attach either an Environmental Impact Statement or submit a separate request in writing for a waiver of the EIS stating reasons as to why the waiver should be granted.

I have attached an Environmental Impact Statement Yes____ No____

I have attached a separate request for a waiver Yes____ No____

13. Identify the North American Industry Classification System (NAICS) number (6 digit) _____
(List of NAICS codes is available at the Zoning Window or on the NJDEP website)

14. Describe materials (other than hazardous) to be utilized or stored on site. Specify quantities to be stored or handled over different time periods (weekly, monthly, or yearly). Describe method of handling these materials.

15. Anticipated number of employees (per shift): _____

16. Hours **and** days of operation: _____

17. Proposed water usage (typical domestic? or process related?): _____

18. Describe traffic to be generated (including commuting employees, shipping and receiving, types of vehicles, and anticipated time periods):

19. Identify any hazardous materials to be processed, stored, sold or disposed on site.

MSDS must be provided. Include in the description:

- a. maximum amounts on hand at any one time
- b. quantities to be stored or delivered to the site on a weekly, monthly and yearly basis
- c. method of delivery and storage (types of containers and locations)
- d. built-in spill and leak containment features
- e. built-in fire protection features
- f. emergency action plan for fire, explosion, spill or leak
- g. description of worst case scenario
- h. special fire fighting or spill containment equipment and training needed

20. Describe type and quantity of both liquid and solid hazardous waste. Identify the licensed waste hauler and ultimate disposal site for all hazardous wastes.

21. Describe any pollutants or nuisances that may potentially enter the environment as a result of the proposed activity; such as air emissions, surface or ground water discharges, waste water effluent, noise or unpleasant odors.

22. Identify all county, state and federal permits required.

23. Identify the size and location of similar operations. Include the names, addresses and telephone numbers of local inspection agencies.

24. The attached **Recycling Plan** must be completed for approval from Public Works for all Non-Hazardous waste generated at the site.

25. The following information must be submitted along with this application or the **application will not be processed:**
- a. An **Approved Site Plan** indicating:
 - location of all structures
 - roads
 - parking spaces
 - existing adjacent land uses
 - b. A **Floor Plan** of the new or additional space to be occupied, with renovations if necessary.
26. As per Ordinance 33-05, each tenancy review application shall be accompanied by a one time fee in the amount of **\$50.00**, payable via check to South Brunswick Township, unless otherwise noted.
27. Will any signs be refaced or made new at this location for the business listed?
 _____yes _____no

If yes, please fill out the attached sign permit application and return to the Planning Department with the required paperwork and fees.

I have read Section 62-1731 through 62-1740 of the Land Use Code and hereby certify that I will comply with all the provisions therein and that the information contained in this form is accurate and complete to the best of my knowledge.

 Tenant's Signature

 Applicant's Signature

 Print Name

 Print Name

 Date

 Date

 Property/Building Owner's Signature

 Print Name

 Date

**SOUTH BRUNSWICK TOWNSHIP
TENANT REVIEW RECYCLING PLAN**

Tenant Business Name: _____

Contact Person: _____ Title: _____

Phone Number: (_____) _____ Email Address: _____

Below is a chart listing materials that are mandated for recycling by Middlesex County and South Brunswick Township. Place a check mark next to any material your business will produce as part of your daily operation. List the company that will provide recycling service for each material and estimate the amount of material you expect to generate along with an estimate of collection frequency. Sign the form.

Mandated Recyclable Material	Check off material produced	Company to provide recycling service	Estimate volume (tons/mo.)	Collection frequency
Commingled bottles and cans				
corrugated cardboard				
mixed paper				
newspaper				
*plastic film				
electronics				
fluorescent bulbs				
rechargeable batteries				
brush				
leaves				
masonry/paving material				
motor vehicle engine batteries				
motor vehicle tires				
motor oil				
white goods				
cfc laden appliances				
textiles				

*only for warehouses, retail establishments with 25 or more employees

The information contained in the form is accurate and ordinance requirements to recycle will be met.

Signed: _____ Date: _____

NOTE: South Brunswick Recycling Center is available for recycling of small quantities of paper and commingled materials. Call 732-329-4000, extension 7274 for more information about material specifications, hours of operation and directions.

Tenancy Review Application item #12

REQUEST FOR A WAIVER OF THE E.I.S.

Business Name: _____

Business Address: _____
(Street & Number, Suite Number if applicable, City, State, Zip)

Business Contact Name: _____

Business Contact Phone # _____

I hereby request a waiver of the Environmental Impact Statement under item #12

Because of the following reason(s) _____

(Signature of person submitting the request)

(Date of Request)

For Office Use Only:

EIS Required: ___Yes___No Zoning Conforms: ___Yes ___No

Floor Plan and Site Plan Attached or on File:___Yes ___No

Additional Review Required: ___Yes ___No

If additional review is required, distribute to:

_____ Code Enforcement

_____ Health Official

_____ Recycling

_____ Environmental Commission

_____ Water/Sewer Revenue

_____ Police (Traffic Safety Bureau)

_____ Fire Marshal

_____ Water

_____ Sewer

Comments: _____

Reviewed by: _____ Date: _____