Township of Gloucester
Planning Board Agenda
February 28, 2017

Salute to the Flag
Opening Statement
Roll Call
General Rules
Meeting will start at 7:00 P. M.
No new applications will be heard after 10:00 P. M.
All persons testifying before the Board must be sworn in.
The Board Chairperson reserves the right to hear applications in any order

MINUTES FOR MEMORIALIZATION

Minutes for Memorialization – January 24, 2017

RESOLUTIONS FOR MEMORIALIZATION

#161073CM (In folder) Minor Subdivision Plan/Bulk C
Courtland Beakley, Jr. Block: 15805 Lot: 47.01

APPLICATIONS FOR REVIEW

#171006RDSPW Site Plan Waiver
Northbrook Behavioral Health Hospital Block: 12301 Lot: 1.01
Location: 425 Woodbury-Turnersville Road
Blackwood, N.J. 08012
Zoned: LLP-1 Lakeland Redevelopment
Adding Addition in Interior Courtyard.
General Correspondence

NJDEP Expedited Review - Treatment Works Approval
Recovery Centers of America
1840 Peter Cheeseman Road
Block: 14003, Lot: 13
Expand the existing facility to accommodate for 125-total beds, resulting in an extra 23,000 gallons per day sewer flow.

Proposed 6” Sewer Force Main
Block: 16504 Lots: 10, 11 & 12-TMsh. No. 165
Jarvis Road

Meeting Adjourned
TOWNSHIP OF GLOUCESTER
PLANNING BOARD

Tuesday January 24, 2017

Mr. Lechner calls the meeting to order sitting in place for Chairman Owens.
Salute to the Flag
Opening Statement made by Mr. Lechner
Mr. Lechner requests a Roll Call.

Roll Call:

<table>
<thead>
<tr>
<th>Name</th>
<th>Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mr. Dintino</td>
<td>Present</td>
</tr>
<tr>
<td>Mr. Dority</td>
<td>Present</td>
</tr>
<tr>
<td>Mr. Guevara</td>
<td>Absent</td>
</tr>
<tr>
<td>Mr. Kricun</td>
<td>Absent</td>
</tr>
<tr>
<td>Mr. Reagan</td>
<td>Absent</td>
</tr>
<tr>
<td>Mrs. Washington</td>
<td>Present</td>
</tr>
<tr>
<td>Councilman Hutchison</td>
<td>Present</td>
</tr>
<tr>
<td>Mrs. Costa</td>
<td>Present</td>
</tr>
<tr>
<td>Mrs. Bradley</td>
<td>Present</td>
</tr>
<tr>
<td>Chairman Owens</td>
<td>Absent</td>
</tr>
<tr>
<td>Mr. Wells</td>
<td>Present</td>
</tr>
<tr>
<td>Mr. Bach/Roorda, Jr.</td>
<td>Present</td>
</tr>
<tr>
<td>Mr. Lechner</td>
<td>Present</td>
</tr>
</tbody>
</table>

Mr. Lechner announces general rules of the meeting.

Minutes for Memorialization

Minutes from January 11, 2017.
Mr. Lechner requested a motion to approve the minutes
Mr. Dintino made a motion seconded by Mr. Hutchinson.

Roll Call:

<table>
<thead>
<tr>
<th>Name</th>
<th>Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mr. Dintino</td>
<td>Yes</td>
</tr>
<tr>
<td>Councilman Hutchison</td>
<td>Yes</td>
</tr>
<tr>
<td>Mrs. Costa</td>
<td>Yes</td>
</tr>
<tr>
<td>Mr. Reagan</td>
<td>Yes</td>
</tr>
</tbody>
</table>
Resolutions for Memorialization

0-97-17
Amending Ordinance
#6 Glen Oaks Redevelopment

To Establish a Commercial Office and Planned Residential Overlay District for Specific Tax Block / Lots pursuant to N.J.S.A. 40A:12A-1E SEQ

Mr. Lechner requested a motion to approve the Resolution.
Mr. Hutchinson made a motion seconded by Mr. Dintino.

Roll Call:

<table>
<thead>
<tr>
<th>Name</th>
<th>Yes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mr. Dintino</td>
<td></td>
</tr>
<tr>
<td>Councilman Hutchinson</td>
<td>Yes</td>
</tr>
<tr>
<td>Mrs. Costa</td>
<td>Yes</td>
</tr>
<tr>
<td>Mr. Reagan</td>
<td>Yes</td>
</tr>
</tbody>
</table>

Applications for Review

#161073CM
Courtland Beakley, Jr.

Minor Subdivision/Bulk C
Block: 15805 Lot: 47.01
Location: 341 Jarvis Road
Erial, New Jersey
Zoned: R1

Mr. Lechner asked for a motion to approve the amendment.
Mr. Hutchinson made a motion seconded by Mr. Dintino.

Roll Call:

<table>
<thead>
<tr>
<th>Name</th>
<th>Yes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mr. Dintino</td>
<td></td>
</tr>
<tr>
<td>Mr. Dority</td>
<td>Yes</td>
</tr>
<tr>
<td>Mrs. Washington</td>
<td>Yes</td>
</tr>
<tr>
<td>Councilman Hutchinson</td>
<td>Yes</td>
</tr>
<tr>
<td>Mrs. Costa</td>
<td>Yes</td>
</tr>
<tr>
<td>Mrs. Bradley</td>
<td>Yes</td>
</tr>
</tbody>
</table>

General Correspondence

Freshwater Wetland Letter of Interpretation/Line Verification.

Application: 1840 Peter Cheeseman Road, LLC
Block: 14003 Lots: 13 & 14
Recovery Center of America
Mr. Lechner asked attending members if they had any Board Business.

Mr. Lechner requested a motion to adjourn.  
Motion to adjourn was made by Mr. Dority seconded by Mr. Hutchinson.

Meeting adjourned.

Recording Secretary,

Christopher Nowak
TOWNSHIP OF GLOUCESTER
Chews-Landing Clementon Road at Hider Lane
P.O. Box 8 Blackwood, NJ 08012
(856) 374-3511 Planning  (856) 374-3512 Zoning  (856) 232-6229

For Office Use Only
Taxes Paid Yes/No  Initial
Fees  Project 

SUBMISSION DATE: JAN 2, 2017
Application No.: 171006RDSRN
Planning Board  Zoning Board of Adjustment

Upon receipt of all fees, documents, plans, etc.

LAND DEVELOPMENT APPLICATION

1. Applicant
Name: Northbrook Behavioral Health Hospital
Address: 425 Woodbury Turnersville Rd
City: Blackwood
State, Zip: New Jersey  08012
Phone: (856) 374-6641  Fax: (___) 637-3991
Email: ____________________________

2. Owner(s) (List all Owners)
Name(s): Camden County Realty
Address: 485 River Road
City: Lakewood
State, Zip: New Jersey  08701
Phone: (856) 364-8050  Fax: (___) ____________________________

3. Type of Application. Check as many as apply:

- Informal Review
- Minor Subdivision
- Preliminary Major Subdivision
- Final Major Subdivision
- Minor Site Plan
- Preliminary Major Site Plan
- Final Major Site Plan
- Conditional Use Approval
- General Development Plan

Legal advertisement and notice is required to all property owners within 200 feet.

4. Zoning Districts (Circle all Zones that apply)

<table>
<thead>
<tr>
<th>ER</th>
<th>R4</th>
<th>GCR</th>
<th>CR</th>
<th>BP</th>
<th>G-RD</th>
<th>LP-1</th>
</tr>
</thead>
<tbody>
<tr>
<td>R1</td>
<td>RA</td>
<td>BWD</td>
<td>NC</td>
<td>IN</td>
<td>M-RD</td>
<td>NVBP</td>
</tr>
<tr>
<td>R2</td>
<td>APT</td>
<td>OR</td>
<td>HC</td>
<td>PR</td>
<td>BW-RD</td>
<td>SCR-HC Overlay</td>
</tr>
<tr>
<td>R3</td>
<td>SCR</td>
<td>OF</td>
<td>GI</td>
<td>FP</td>
<td>L-RD</td>
<td>NVSCR Overlay</td>
</tr>
</tbody>
</table>

5. The following applicants are required to be represented by a New Jersey Attorney: Corporation, Partnership, Limited Liability Corporation and Limited Liability Partnership

Name of Attorney: Esq.
Address: 40 E. Lake St
City: Woodbury, NJ

Firm: Holsten, McDonald
State, Zip: NJ 08001
Phone: (856) 664-8888  Fax: (856) 664-8888
Email: wziegler@holstenlaw.com

1 of 4
6. Name of Persons Preparing Plans and Reports:

**Name:** Brommer Architects, LLC  
**Address:** 723 Electronic Drive  
**Profession:** Architect  
**City:** Horsham  
**State, Zip:** PA. 19044  
**Phone:** (215) 657-4010  
**Fax:** (215) 657-4340  
**Email:** barry.brommer@brommerarchitects.com

| Name: |  
| Address: |  
| Profession: |  
| City: |  
| State, Zip: |  
| Phone: |  
| Fax: |  
| Email: |  

7. Location of Property:

| Street Address: | 425 Woodbury Turnerville Rd  
| Tract Area: | 32.49 |

| Block(s): | 12301  
| Lot(s): | 1.01 |

8. Land Use:

**Existing Land Use:** Long Term Care/Behavioral Health Hospital  
**Proposed Land Use (Describe Application):** See attached Project Narrative

9. Property:

| Number of Existing Lots: | 1  
| Number of Proposed Lots: | 1 |

**Proposed Form of Ownership:**  
- Fee Simple  
- Condominium  
- Cooperative  
- Rental  

**Are there existing deed restrictions?**  
- No  
- Yes  

**Are there proposed deed restrictions?**  
- No  
- Yes  

10. **Utilities:** (Check those that apply.)  

- Public Water  
- Public Sewer  
- Private Well  
- Private Septic System

11. List of Application Submission Materials:  
List all additional materials on an additional sheet.

12. List Previous or Pending Applications for this Parcel:  
List all applications on a separate sheet.
### 13. Zoning

<table>
<thead>
<tr>
<th>All Applications</th>
<th>Proposed</th>
<th>Fence Application</th>
<th>Proposed</th>
</tr>
</thead>
<tbody>
<tr>
<td>Front setback 1</td>
<td></td>
<td>Setback from E.O.P.*1</td>
<td></td>
</tr>
<tr>
<td>Front setback 2</td>
<td></td>
<td>Setback from E.O.P.*2</td>
<td></td>
</tr>
<tr>
<td>Rear setback</td>
<td></td>
<td>Fence type</td>
<td></td>
</tr>
<tr>
<td>Side setback 1</td>
<td></td>
<td>Fence height</td>
<td></td>
</tr>
<tr>
<td>Side setback 2</td>
<td></td>
<td>*E.O.P. = Edge Of Pavement.</td>
<td></td>
</tr>
<tr>
<td>Lot frontage</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Lot depth</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Lot area</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Building height</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Pool Requirements

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
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</thead>
<tbody>
<tr>
<td>Setback from R.O.W.1</td>
<td></td>
</tr>
<tr>
<td>Setback from R.O.W.2</td>
<td></td>
</tr>
<tr>
<td>Setback from property line 1</td>
<td></td>
</tr>
<tr>
<td>Setback from property line 2</td>
<td></td>
</tr>
<tr>
<td>Distance from dwelling</td>
<td></td>
</tr>
<tr>
<td>Distance = measured from edge of water.</td>
<td></td>
</tr>
<tr>
<td>R.O.W. = Right-of-way.</td>
<td></td>
</tr>
<tr>
<td>Setback = Measured from edge of pool apron.</td>
<td></td>
</tr>
</tbody>
</table>

### Garage Application

<table>
<thead>
<tr>
<th>Garage Application</th>
<th>Shed Requirements</th>
</tr>
</thead>
<tbody>
<tr>
<td>Garage Area</td>
<td>Shed area</td>
</tr>
<tr>
<td>Garage height</td>
<td>Shed height</td>
</tr>
<tr>
<td>Number of garages</td>
<td>Setback from R.O.W.1</td>
</tr>
<tr>
<td>(Include attached garage if applicable)</td>
<td>Setback from R.O.W.2</td>
</tr>
<tr>
<td>Number of stories</td>
<td>Setback from property line 1</td>
</tr>
<tr>
<td></td>
<td>Setback from property line 2</td>
</tr>
</tbody>
</table>

### 14. Parking and Loading Requirements:

- Number of parking spaces required: _________
- Number of parking spaces provided: _________
- Number of loading spaces required: _________
- Number of loading spaces provided: _________

### 15. Relief Requested:

- [ ] Check here if zoning variances are required.
- [ ] Check here if exceptions to the application or municipal requirements are requested (N.J.S.A. 40:55D-51).
- [ ] Check here if exceptions to the Residential Site Improvement Standards (RSIS, N.J.A.C. 5:21-3.1) are requested.
- [ ] Check here if waivers from the Residential Site Improvement Standards (RSIS, N.J.A.C. 5:21-3.2) are requested. [Such waivers require application to, and approval of the N.J. Site Improvement Advisory Board].

**NOTE:** If any of above are required, attach hereto separate exhibit(s) for each category of relief sought, stating the factual basis, legal theory, and whether they have been previously granted.

### 16. Signature of Applicant

[Signature]

Date: 1/12/17

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<table>
<thead>
<tr>
<th>Signature of Co-applicant</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>
17. Consent of Owner(s):

I, the undersigned, being the owner(s) of the lot or tract described in this application, hereby consent to the making of this application and the approval of the plans submitted herewith. I further consent to the inspection of this property in connection with this application as deemed necessary by the municipal agency. (If owned by a corporation, attach resolution authorizing application and officer signature.)

[Signature]

Date: 1/12/17

Print Name:

Signature:


Complete each of the following sections:

A. Is this application to subdivide a parcel of land into six or more lots?
   - [ ] No  [ ] Yes

B. Is this application for a variance to construct a multiple dwelling of 25 or more family units?
   - [ ] No  [ ] Yes

C. Is this application for approval on a site or sites for commercial purposes?
   - [ ] No  [ ] Yes

D. Is the applicant a corporation?
   - [ ] No  [ ] Yes

E. Is the applicant a limited liability corporation?
   - [ ] No  [ ] Yes

F. Is the applicant a partnership?
   - [ ] No  [ ] Yes

IF YES TO ANY OF THE ABOVE:

1. List the names and addresses of all stockholders or individual partners owning at least 10 percent of its stock of any class or at least 10 percent of the interest in partnership, as the case may be. (Use additional sheets as necessary).

2. Does a corporation or partnership own 10 percent or more of the stock in this corporation or partnership?
   - [ ] No  [ ] Yes

IF YES:

List the names and addresses of the stockholders of that corporation holding 10 percent or more of the stock or 10 percent or greater interest in that partnership, as the case may be. This requirement is to be followed by every corporate stockholder or partnership, until the names and addresses of the non-corporate stockholder and individual partners with 10 percent or more ownership have been listed. (Use additional sheets as necessary.)

[Signature of Applicant]

Date: 1/12/17

Print Name:

19. Survey waiver certification:

As of the date of this application, I hereby certify that the survey submitted with this application, under the date of , shows and discloses the premises in its entirety, described as Block 12301 Lot 101, and I further certify that no buildings, fences or other facilities have been constructed, installed or otherwise located on the premises after the date of the survey with the exception of the structures shown.

State of New Jersey, County of Camden: [Signature]

Name of property owner or applicant:

Sworn and subscribed to [Signature] Notary public

My Commission Expires 10/04/2020

Avrohom Y. Maierovits
Notary Public
PROJECT NARRATIVE

Northbrook Behavioral Health Hospital
Building Addition and Interior Alterations
425 Woodbury Turnersville Rd.
Blackwood, NJ 08012

The project includes a two-story addition to the facility within an interior courtyard. The existing courtyard is partially paved and the paved area is approximately the same square footage as the proposed addition (see attached photos). The addition will add 1,150 sf to the existing footprint of 161,500 sf.

The addition will provide the facility with 6 additional psychiatric beds and an office per floor. There will be a total of 12 new psychiatric beds, bringing the total number of psychiatric beds to 81 per floor, or 162 total in the facility.

BROMMER ARCHITECTS LLC
December 2, 2016

Mr. Moshe Barash
Northbrook Behavioral Health Hospital
425 Woodbury Turnersville Rd.
Blackwood, NJ 08012

Re: Lakeland Redevelopment Area

Dear Mr. Barash

Thank you for sending over your plans and concepts for the building addition and interior alterations for the Northbrook Behavioral Health Hospital located within the Lakeland Redevelopment Area ("Lakeland"). As you may know, the Camden County Improvement Authority ("Authority") is the redevelopment entity for Lakeland. Based on staff review of the proposed plans, the Authority has concluded that the proposed activity will have no impact on any potential redevelopment activities within the Lakeland Redevelopment Area. As it is requested by the Township Planning Board, please submit a copy of this letter with your site plan application. If you have any questions regarding this letter, please call me at (856) 374-6152.

Sincerely,

James Lex
Chief Operating Officer

Co: Christopher Orlando, Executive Director
    David Patterson, Esquire
Zoning Permit Denial
425 TURNERSVILLE RD
Block/Lot 12301/1/T01

Applicant
CAMDEN COUNTY HEALTH SERVICES
425 TURNERSVILLE ROAD
BLACKWOOD, NJ 08012

Real Estate Owner
CAMDEN COUNTY HEALTH SERVICES
425 TURNERSVILLE ROAD
BLACKWOOD, NJ 08012

Zone
LP1
Application is
Denied

This is to certify that the above-named applied for a permit to/authorization for:
a proposal of first floor addition as well as a second floor addition totaling an additional 1,160
square footage to the orginal. This application for approval is hereby denied

Comments on Decision:
A Redevelopment Agreement is required as well as Site Plan approval by the Planning Board.

Additional permits must be obtained through the Construction Office

Gloucester Township
P O Box 8
Blackwood, NJ 08012
(856)228-4000  FAX(856)232-6229

Ailsa Ortiz
Zoning Officer
July 20, 2016

Applic No. 10658
5617

Deliver to...

CAMDEN COUNTY HEALTH SERVICES
425 TURNERSVILLE ROAD
BLACKWOOD, NJ 08012
APPLICATION FOR ZONING PERMIT

Submission Date: 7/8/16  Tax Block/Lot: 12031/1.01

Work site address: 425 Woodbury Turnersville RD
Contact Person: Moshe Barash  Phone: (732) 691 5039

Check how you want to receive permit:  ☐ REGULAR MAIL  ☐ E-MAIL  ☐ FAX  ☐ PICK-UP

Do you have an approval from the Planning Board or Zoning Board of Adjustment for this project?  ☐ Yes  ☐ No
If yes, provide the application number:
Resolution approval date:

Applicant

Name: Northbrook Behavioral Health Hospital
Address: 425 Woodbury Turnersville RD
City: Blackwood  State: NJ  Zip: 08012
Phone: (856) 374 6641  Fax: (____) (____) (____)
E-mail: moshe@oceanhealthcare.com

Owner

Name: Camden County Realty LLC
Address: 485 river
City: Lakewood  State: new jersey  Zip: 08701
Phone: (732) 691 5039  Fax: (____) (____)
E-mail: moshe@oceanhealthcare.com

Check the type of project below:

IMPORTANT: THIS APPLICATION MUST INCLUDE A PROPERTY PLAN (BIRD'S EYE VIEW) OR LAND SURVEY THAT SHOWS THE PROPOSED BUILDING/STRUCTURE DIMENSIONS (LENGTH X WIDTH) AND DISTANCE FROM AT LEAST TWO (2) PROPERTY LINES. ALSO SHOW EXISTING BUILDINGS, SHEDS, POOLS, DRIVEWAYS, WALKWAYS, PATIOS, FENCES, ETC.

RESIDENTIAL

☐ DWELLING: _______ x _______ square feet | height
☐ ADDITION: _______ x _______ x _______ length | width | height
☐ DECK: _______ x _______ length | width
☐ GARAGE: _______ x _______ length | width | height
☐ SHED: _______ x _______ length | width | height
☐ POOL: _______ x _______ length | width or diameter
☐ FENCE: _______ x _______ length | width
☐ DRIVEWAY: _______ length | width
☐ PATIO: _______ x _______ length | width
☐ OTHER: _______

COMMERCIAL

☐ NEW CONSTRUCTION (describe project): 2nd fl. addition 1
☐ TENANT FIT-UP (describe the proposed use): 3rd floor, 4th floor
☐ OTHER (describe project): See attached project narrative

Moshe Barash  AGENT/OWNER'S NAME

SIGNATURE
TOWNSHIP OF GLOUCESTER
Inter-office Correspondence

TO: Planning Board

FROM: Kenneth D. Lechner, PP, AICP, Director/Planner
Dept. of Community Development & Planning

RE: APPLICATION #171006RDSPW Escrow #11058
Northbrook Behavioral Health Hospital
BLOCK 12301, LOT 1.01

DATE: February 13, 2017

The Applicant requests a site plan waiver for a "Two-story addition" adding a 1,150 sf footprint at the "Long Term Care/Behavioral Hospital" within the LP1 – Lakeland Phase 1 Redevelopment Area. The project is located on the east side of Woodbury-Turnersville Road north of Lakeland Road.

The application and support documents have been reviewed and the following comments are offered for your consideration.

Should you have any questions regarding this application, do not hesitate to contact me at (856) 374-3511.

- Applicant: Northbrook Behavioral Health Hospital, 425 Woodbury-Turnersville Road, Blackwood, NJ 08012 (telephone #856-374-6641).
- Owner: Camden County Realty, 485 River Road, Lakewood, NJ 08701 (telephone #732-364-8050).
- Attorney: William F. Ziegler, Esq., Holston, MacDonald, Uzdavinis, Zeigler & Myles, 66 Euclid Street, Woodbury, NJ 08096 (telephone #856-848-1898).

I. INFORMATION SUBMITTED

1. Holston, MacDonald, Uzdavinis, Zeigler & Myles Camden County Application Letter dated 01/27/17.

2. Holston, MacDonald, Uzdavinis, Zeigler & Myles Transmittal Letter dated 01/18/17.

3. Township of Gloucester Land Development Application Form with disclosure statement dated 01/25/17.

4. Brommer Architects, LLC Project Narrative, no date

5. Five (5) color photos.

6. Camden County Improvement Authority as Redevelopment Entity Approval Letter dated 12/02/17.

7. Minor Subdivision Plat (copy), as prepared by & M Associates comprising one (1) sheet dated 12/05/12, last revised 3/25/13.
8. Plot Plan, as prepared by Brommer Architects, LLC comprising one (1) sheet dated 4/03/15, last revised 11/18/15.

9. Proposed Building Elevations and Floor Plan, as prepared by Brommer Architects, LLC consisting of the following:

<table>
<thead>
<tr>
<th>Sheet</th>
<th>Plan Description</th>
<th>Date / Latest Revision</th>
</tr>
</thead>
<tbody>
<tr>
<td>A-2</td>
<td>Quarter Scale Const/Demo Plans</td>
<td>4-03-15 / 11-18-15</td>
</tr>
<tr>
<td>A-4</td>
<td>Roof Plan &amp; Exterior Elevations Plan</td>
<td>4-03-15 / 11-18-15</td>
</tr>
</tbody>
</table>

II. REDEVELOPMENT PLAN REVIEW

1. The Lakeland Phase 1 Redevelopment Zone allows the permitted uses in the SCR – Senior Citizen Residential of Article IV, of Ordinance O-03-03, Land Development.

   a. Long-term care facilities are permitted uses in the LP1 – Lakeland Phase 1 Redevelopment Zone.

      i. The former county health care center and county offices and facilities do not require specific area, yard, height, and building coverage or other general requirements (p.7, Lakeland Complex Phase 1 (Block 12301) Redevelopment Plan).

<table>
<thead>
<tr>
<th>Description</th>
<th>Required (Long-term care)</th>
<th>Lot 1.01</th>
<th>Conforms</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lot size (min.)</td>
<td>4 acres</td>
<td>32.49 acres</td>
<td>yes</td>
</tr>
<tr>
<td>Lot size (max.)</td>
<td>8 acres</td>
<td>32.49 acres</td>
<td>yes</td>
</tr>
<tr>
<td>Lot frontage (min.)</td>
<td>200 ft.</td>
<td>829.07 ft.</td>
<td>yes</td>
</tr>
<tr>
<td>Lot depth (min.)</td>
<td>300 ft.</td>
<td>±852 ft.¹</td>
<td>yes</td>
</tr>
<tr>
<td>Building length through axis (max.)</td>
<td>240 ft.</td>
<td>±780 ft.¹</td>
<td>enc</td>
</tr>
<tr>
<td>Building coverage (max.)</td>
<td>35%</td>
<td>11.50%</td>
<td>yes</td>
</tr>
<tr>
<td>Lot coverage (max.)</td>
<td>65%</td>
<td>27.73%</td>
<td>yes</td>
</tr>
<tr>
<td>Density (max.)²</td>
<td>10 du/ac.</td>
<td>2.49 du/ac.</td>
<td>yes</td>
</tr>
</tbody>
</table>

Principal Building Minimum Yard Depths and Height Limitations

<table>
<thead>
<tr>
<th>Description</th>
<th>Minimum Yard Depth</th>
<th>Minimum Building Height</th>
<th>Conforms</th>
</tr>
</thead>
<tbody>
<tr>
<td>Front yard (min.) - addition</td>
<td>75 ft.</td>
<td>±420 ft.¹</td>
<td>yes</td>
</tr>
<tr>
<td>Side yard (min.) - addition</td>
<td>50 ft.</td>
<td>±546 ft.¹ / ±700 ft.¹</td>
<td>yes / yes</td>
</tr>
<tr>
<td>Rear yard (min.) - addition</td>
<td>50 ft.</td>
<td>±640 ft.¹</td>
<td>yes</td>
</tr>
<tr>
<td>Building Height (max.)</td>
<td>3 stories or 45 ft.</td>
<td>n/a</td>
<td>yes</td>
</tr>
</tbody>
</table>

Parking Area Setbacks

<table>
<thead>
<tr>
<th>Description</th>
<th>Minimum Distance</th>
<th>Minimum Building Height</th>
<th>Conforms</th>
</tr>
</thead>
<tbody>
<tr>
<td>From building</td>
<td>12 ft.</td>
<td>±12 ft.¹</td>
<td>yes</td>
</tr>
<tr>
<td>From public street</td>
<td>50 ft.</td>
<td>±72 ft.¹</td>
<td>yes</td>
</tr>
<tr>
<td>From internal street or collector driveway</td>
<td>10 ft.</td>
<td>±18 ft.¹</td>
<td>yes</td>
</tr>
</tbody>
</table>

¹ = Scaled data.
² = One (1) bed equals 0.50 dwelling unit.

enc = Existing nonconformance.

APPLICATION #17006RDSWPW
Northbrook Behavioral Health Hospital
BLOCK 12301 LOT 1.01
III. WAIVER COMMENTS
The Applicant has requested a waiver from Site Plan Review as per §801.A(3). The applicable Land Development Ordinance states the following:

"The approving authority may waive the requirement of site plan approval whenever it determines that the proposed development, alteration, repair, or change of use or occupancy does not affect the existing condition of the lot or premises, including: topography; vegetation; drainage; flood plains; marshes and waterways; open space; walkways, means of ingress and egress; utility services; landscaping; structures; signs; lighting and screening devices; and other considerations of site plan review ..."

IV. VARIANCES COMMENTS
The instant application doesn’t require any variances.

V. LAND DEVELOPMENT ORDINANCE COMMENTS
The Applicant is advised of the following additional requirements of the Land Development Ordinance:

1. A soil removal plan if soil is to be removed from the site for use or sale other than the premises subject to this application as per §801.C, Soil Removal.
2. A grading plan prepared and sealed by licensed professional engineer as per §814, Grading Approval.
3. Affordable housing requirement as per §902, Affordable Housing Fees and Procedures.
4. Before recording final subdivision plats or as condition of final site plan approval or as condition to the issuance of a zoning permit pursuant to N.J.S.A. 40:50D-65d the furnishing of a performance guarantee, maintenance guarantee, and inspection fees as per §903, Guarantee and Inspections and §904, Certification of Guarantee Required; Estimate of Guarantee.
5. Requirements precedent to construction as per §905, Pre-conditions to Commencement of Construction.
6. Construction of off-tract improvements as per §906, Off-tract Improvements Recapture.
7. A zoning permit is required prior to the issuance of any construction permits and prior to the issuance of a Certificate of Occupancy by the Construction Official the Applicant must acquire a Certificate of Zoning Conformity from the Zoning Officer as per §1102, Permits, General, §1103, Zoning Permit and §1104, Certificate of Zoning Conformity.

VI. RECOMMENDATIONS
1. The Applicant is advised revised plans and support documents would not be accepted by this Department without sufficient escrows for professional services in accordance with the signed escrow agreement.

cc: Northbrook Behavioral Health Hospital
    William F. Ziegler, Esq.
    Barry Brommer, RA
    Richard Wells, Esq.
    Steven M. Bach, PE
February 10, 2017

Township of Gloucester
Chews Landing-Clementon Road, at Hider Lane
PO Box 8
Blackwood, NJ 08012-0008

Attn: Ken Lechner, Township Director / Planner

Re: Northbrook Behavioral Health Hospital
425 Woodbury Turnersville Road
Block 12301, Lot 1.01
Site Plan Waiver
Review No. 1
Bach Project No. GTPB-2017-1

Dear Mr. Lechner:

We have received the following items submitted for the referenced project:

- Township of Gloucester Land Development Application for a Minor Site Plan, received by the Gloucester Twp. Planning Board on January 19, 2017.


- Architectural Plans (Sheets A-2 & A-4) entitled "Building Addition & Interior Alterations at Northbrook Behavioral Health Hospital, 425 Woodbury Turnersville Road, Blackwood, New Jersey", prepared by Brommer Architecture, LLC, dated April 3, 2015, revised to November 18, 2015.


GENERAL INFORMATION:

Applicant: Northbrook Behavioral Health Hospital
425 Woodbury Turnersville Road
Blackwood, New Jersey 08012
856-374-6641

Owner: Camden County Realty
485 River Road
Lakewood, New Jersey 08701
732-364-58050
Northbrook Behavioral Health Hospital  
425 Woodbury Turnersville Road  
Block 12301, Lot 1.01  
Site Plan Waiver  
Review No. 1  
Bach Project No. GTPB-2017-1  
February 10, 2017  
Page 2 of 2

PROJECT SUMMARY:

This application is for the 1,150 square foot addition to an existing 161,500 square foot medical facility on the northeast side of Woodbury – Turnersville Road (County Route 707) and the northerly side of Lakeland Road (County Route 707). The proposed addition will be located within a portion of an interior courtyard of the existing building. There are no additional site improvements being proposed by this application. The site is a 32.4 acre parcel of land located in the Lakeland Phase I Redevelopment Plan (LP-1) Zoning District. The applicant is seeking a Site Plan Waiver approval.

CONCLUSION:

Our office has reviewed all information submitted for conformance with the Township’s Land Development Ordinance.

The applicant has requested waivers for many of the required items of the submitted Land Development Ordinance Submission Checklist.

As there are no site improvements proposed by this application, our office has no objection to the Site Plan waiver requested.

If there are any questions or if any additional information is required please contact this office.

Very truly yours,

BACH ASSOCIATES, PC

Steven M. Bach, PE, RA, PP, CME
President

Cc: Gloucester Township Planning Board Members  
Richard Wells, Esq., PB Solicitor  
Northbrook Behavioral Health Hospital, Applicant  
Camden County Realty, Owner  
William Biegler, Esq., Applicant’s Attorney  
Barry Brommer, Applicant’s Professional
TOWNSHIP OF GLOUCESTER
PLANNING BOARD TRANSMITTAL

DATE: January 25, 2017

LOCATION: 425 Woodbury Turnersville Rd.
Blackwood, NJ 08012

APPLICATION NO. 171006RDSPW

Block: 12301 Lot: 1.01

Escrow: 11058

NORTHBROOK BEHAVIORAL HEALTH HOSPITAL
ZONE: LP-1 LakeLand Redevelopmnet

TRANSMITTAL TO:

O Camden County Planning
O Richard Wells
O Steven Bach, Esq.
O Planner
O Taxes & Tax Assessor
O Aqua Water Co.
O New Jersey America
O Fire District 1 2 3 4 5 6
O MUA
O Construction
O Traffic/Police
O GTEMS

STATUS of APPLICATION: Site Plan Waiver Addition adding 1,150 sf. To existing Footprint of 161,500 sq. ft. (Interior Court Yard)

PURPOSE OF TRANSMITTAL: ☑ For Your Review

☑ 1 Copy – Proposed Bldg. Addition, Lakeland Facility,
☑ 1 Copy – Application, Checklist, Project Narrative
☐ 1 Copy – Fresh Water Wetlands Statement/Ordinance Relief
☐ 1 Copy – Aerial Map Exhibit/Boundary & Topographic Survey
☐ 1 Copy – Certification from Tax Assessor –New Lot Numbers
☐ 1 Copy – Minor Subdivision/Legal Descriptions/Access & Road Easements
☐ 1 Copy – Stormwater Management Report
☐ 1 Copy – Traffic Impact Study
☐ 1 Copy – Plan of Survey & Topography

OK 1-26-17 OLS Bldg – Site Plan
January 30, 2017

Township of Gloucester
Dept. of Community Development
P.O. Box 8
Blackwood, New Jersey 08012

Re: Application #171006RDSPW
Northbrook Behavioral Health Hospital
425 Woodbury Turnersville Road, Blackwood, NJ 08012
Block 12301, Lot 1.01

Gentlemen:

In response to your letter regarding the above application, a Form “F” Application is required.

Should you have any further questions, please feel free to contact me.

Very truly yours,

THE GLOUCESTER TOWNSHIP
MUNICIPAL UTILITIES AUTHORITY

[Signature]

Raymond J. Carr
Executive Director

RJC: mh
TOWNSHIP OF GLOUCESTER
PLANNING BOARD TRANSMITTAL

APPLICATION NO. 171006RDSPW

DATE: January 25, 2017

LOCATION: 425 Woodbury Turnersville Rd.
Blackwood, NJ 08012

Block: 12301 Lot: 1.01

Escrow: 11058

NORTH BROOK BEHAVIORAL HEALTH HOSPITAL
ZONE: LP-1 LakeLand Redevelopment

TRANSMITTAL TO:

O Camden County Planning
O Richard Wells
O Steven Bach, Esq.
O Planner

O Taxes & Tax Assessor
O Aqua Water Co.
O New Jersey America
O Fire District 1 2 3 4 5 6
O MUA
O Construction
O Traffic/P o lice
O GTEMS

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☐ 1 Copy – Stormwater Management Report
☐ 1 Copy – Traffic Impact Study
☐ 1 Copy – Plan of Survey & Topography

RECEIVED
JAN 3 0 2017

No Issues
1/3/17

Assess
TOWNSHIP OF GLOUCESTER
PLANNING BOARD TRANSMITTAL

APPLICATION NO. 171006RDSPW

DATE: January 25, 2017

LOCATION: 425 Woodbury Turnersville Rd.
Blackwood, NJ 08012

Block: 12301 Lot: 1.01

Escrow: 11058

NORTH BROOK BEHAVIORAL HEALTH HOSPITAL
ZONE: LP-1 Lakeland Redevelopment

TRANSMITTAL TO:

O Camden County Planning
O Richard Wells
O Steven Bach, Esq.
O Planner
O Taxes & Tax Assessor
O Aqua Water Co.
O New Jersey America
O Fire District 1 2 3 4 5 6
O MUA
O Construction
O Traffic/Police
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☐ 1 Copy – Stormwater Management Report
☐ 1 Copy – Traffic Impact Study
☑ 1 Copy – Plan of Survey & Topography

DENIED
Richard Donato, Fire Marshal

1. Need sprinkler info/water flow rates
2. States within Court yard need to be moved/where?
To Whom It May Concern:

Our records indicate that the below referenced property is current with taxes and there are no outstanding liens.

Name: Camden County Realty LLC
Address: 4625 Turnerville Rd
Block: 12301 Lot: 101

If you have any questions, please feel free to contact the tax office at 856-228-4000.

Date 1/23/19

Gloucester Township Tax Collector
CAMDEN COUNTY PLANNING BOARD APPLICATION
SUBMISSION REQUIREMENTS

Documents must be submitted to the Planning Division Staff at least thirty (30) working days prior to the scheduled Planning Board meeting. No provisional approvals will be issued at Planning Board meeting.

Subdivision Requirements:

☐ Two (2) Copies of the County Planning Board Application (Municipal use section must be filled out and bottom of this page must be signed)
☐ One (1) Copy of Local Municipal Application
☐ One (1) Copy of the Fee Schedule, Filled Out and Signed (Checks made payable to Camden County Treasurer)
☐ One (1) Set of Plans
☐ Two (2) Copies of the Affidavit of Ownership
☐ One (1) Copy of Pinelands Certificate of Filing (if applicable)

Site Plan & Site Plan Revision Requirements

☐ Two (2) Copies of the County Planning Board Application (Municipal use section must be filled out and bottom of this page must be signed)
☐ One (1) Copy of Local Municipal Application
☐ One (1) Copy of the Fee Schedule, Filled Out and Signed (Checks made payable to Camden County Treasurer)
☐ Two (2) Sets of Plans of Signed and Sealed Plans (Only 24" or 36" Site plans will be accepted)
(Please note that plans must reflect all requirements contained in Subdivision and Site Plan Procedures, Engineering and Planning Standards Vol. 1 & Development Regulations Vol. 2)
☐ Two (2) Copies of County Road Improvement Plans (if applicable and not included in Original Set of Plans)
☐ Two (2) Copies of a Signed and Sealed Survey
(Conducted by a licensed surveyor if existing documents are referenced in accordance with NJAC 13:40-7.2 (a 3))
☐ Two (2) Sets of Drainage Calculations (Data based upon 10 YEAR PRE & 25 YEAR POST Year Storm Event)
☐ Two (2) Sets of Traffic Impact Study (if available)
☐ Two (2) Copies of the Local Engineer Report
☐ Two (2) Copies of the Affidavit of Ownership
☐ One (1) Copy of Pinelands Certificate of Filing (if applicable)
☐ One (1) Copy of All Dedication, Easement, Deed, and Other Relevant Documents

Please Submit the Following Additional Items:

☐ Map or Most Recent Aerial Photo of Site
☐ Digital Copy of the Site Plan, Subdivision Plan or Major Subdivision
(The digital copy should be provided in PDF format via email or CD if written. If no digital copy can be provided, please provide a 11" x 17" reduction of the plan)

Signature of Agent or Applicant

WILLIAM F. ZIEGLER
Attorney At Law
State of New Jersey
CAMDEN COUNTY PLANNING BOARD APPLICATION

Camden County Planning Board
Charles J. DePalma Public Works Complex
2311 Egg Harbor Road
Lindenwold, NJ 08021
Phone: 856.566.2978 Fax: 856.566.2988
E-mail: planningdivision@camden county.com

This application must be completed in full, duplicated, signed and filed with the municipality. Please also submit a copy of local application and approval. See County Submission requirement list for all documents necessary for a complete application.

(PLEASE TYPE OR PRINT LEGIBLY)

<table>
<thead>
<tr>
<th>Project Information:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Project Name: NORTHBECK BEHAVIORAL HEALTH HOSP. - BUILDING ADDITION &amp; INTERIOR ALTERATIONS</td>
</tr>
<tr>
<td>Project Address (if applicable) &amp; Municipality: 425 Woodbury Turnersville Rd.</td>
</tr>
<tr>
<td>Abuts County Road: __________________________ County Route No.: __________________________</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Type of Submission (please check one):</th>
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<tbody>
<tr>
<td>☒ New Minor Subdivision</td>
</tr>
<tr>
<td>☒ New Major Subdivision</td>
</tr>
<tr>
<td>☒ Request for Letter of No Impact or Waiver Review</td>
</tr>
<tr>
<td>☒ Revision to Prior Site Plan</td>
</tr>
<tr>
<td>Original Site Plan Application No.: __________________ Date Originally Approved: __________________</td>
</tr>
<tr>
<td>☒ Resubmission of Major Subdivision</td>
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<tr>
<td>Original Major Subdivision Application No.: __________________ Date Originally Approved: __________________</td>
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</tbody>
</table>

<table>
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<th>Tax Map Data:</th>
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<td>Plate(s): __________________</td>
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<tr>
<td>Block(s): 12301</td>
</tr>
<tr>
<td>Lot(s): 1.01</td>
</tr>
<tr>
<td>Existing Zoning: SCR</td>
</tr>
<tr>
<td>Variance(s) Required: __________________</td>
</tr>
</tbody>
</table>

The Camden County planning process concerns itself primarily with a review of factors that directly impact county facilities such as County owned roads and stormwater management systems. This application as well as Subdivision and Site Plan Procedures, Engineering and Planning Standards Vol. 1 & Development Regulations Vol. 2 can be found on the Camden County Planning Division website: http://www.camden county.com/government/office-departments/planning/division. If you have any questions please call 856-566-2978.
CAMDEN COUNTY PLANNING BOARD APPLICATION

Applicant & Agent Contact Information (please type or print legibly, or your application may be delayed):

**Health Hosp.**

Applicant: **Northbrook Behavioral**
Phone: 374-6641 Fax: 637-3991
Address: 425 Woodbury Tville Rd. Town & State: Blackwood/Colo. Tp. N.J.

Email: ________________________________ Zip: ________________________________

Attorney: **William Ziegler** Phone: 848-5858 Fax: 848-1898
Address: 66 Eucalid St. Town & State: Woodburn, N.J.
Email: wziegler@holstonlaw.com Zip: 08096

Engineer: **Brommer Architects, LLC** Phone: (215)657-4010 Fax: (215)657-4340
Address: 725 Electron Drv, Ste 300 Town & State: Horsham, PA
Email: barry.brommer@brommerarchitects.com Zip: 19044

Proposed Use (please check all that apply):

- [ ] Residential
  - Single Family Detached
  - Town Homes
  - Duplex
  - Apartments
  - Condominiums
  - Medical Care Residential
- [ ] Commercial
  - Retail
  - Office
  - Restaurant/ Food Establishment
  - Hospitality/ Hotel Space
  - Medical Use
  - Sports or Entertainment
- [ ] Industrial
  - Maintenance/ Repair Shop
  - Flex Space
  - Storage/ Warehouse
  - Distribution Center
  - Manufacturing
  - Other:

Project Description & Statistics:

Short Description of Project: **NARRATIVE ENCLOSED**

Increase in Impervious Coverage?: **YES / NO** Total Increase or Decrease: __________________________

Total Amount of Land Disturbed: **1,100 SF Addition**

Total Gross SF of all Buildings/ Development: __________________________

Total New Residential Units: __________________________

Total New Jobs Created: __________________________
PROJECT NARRATIVE

Northbrook Behavioral Health Hospital
Building Addition and Interior Alterations
425 Woodbury Turnersville Rd.
Blackwood, NJ 08012

The project includes a two-story addition to the facility within an interior courtyard. The existing courtyard is partially paved and the paved area is approximately the same square footage as the proposed addition (see attached photos). The addition will add 1,150 sf to the existing footprint of 161,500 sf.

The addition will provide the facility with 6 additional psychiatric beds and an office per floor. There will be a total of 12 new psychiatric beds, bringing the total number of psychiatric beds to 81 per floor, or 162 total in the facility.
CAMDEN COUNTY PLANNING BOARD APPLICATION

Subdivision Description (if applicable):

Does this application include a lot consolidation? YES / NO

Will new lots be created? YES NO How Many New Lots?

Size of Existing Lot(s):

Portion to be Subdivided: N/A

Municipal Use:

Title of Municipal Official: Gloucester Township Director of Planning

Authorized Municipal Signature: Date: 1/30/17

Transmittal Date (if applicable): 1/30/17

Phone Number: (961) 374-3611

Signatures Required:

Name of Applicant: Northbrook Behavioral Health.

Signature of Applicant: Date: 1/27/17

Agent Completing Application: WILLIAM F. ZIEGLER Attorney At Law State of New Jersey

Signature of Agent: Date:

For County Use:

Classification of Application:
Fees Included with Application: YES / NO
County Plan Number:

Stamp Date Received Below
Name of Company/Organization: Northbrook Behavioral Health, LLC

Is the Company a Corporation? YES / NO LLC

If yes, what State is the Corporation incorporated in? NJ

Is the Company a Partnership? YES / NO

Is Company an Individual Owner? YES / NO

Please list any/all individuals who are owners (full/part) / (individual/multiple) of the Company/Organization. If applicant is a Non-Profit Organization, please list all Board Members.

<table>
<thead>
<tr>
<th>Name</th>
<th>Address</th>
<th>Title</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>See list attached to Gloucester Township Application as to owners of the LLC</td>
<td></td>
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</tbody>
</table>

I certify that the above information is true and correct to the best of my knowledge:

X_________________________ Signature of Owner & Title __________________________ Date ____________

X_________________________ Signature of Owner & Title __________________________ Date ____________
CAMDEN COUNTY PLANNING BOARD APPLICATION
FEE SCHEDULE

Applicant's Name: Northbrook Behavioral Health
Project Name: Northbrook Hospital Addition
Project Address: 425 Woodlawn Terrace Rd Plate: Block: 12301 Lot: 101

Type of Plan
- [ ] Minor Subdivision (3 lots or less)
- [ ] Major Subdivision (4 lots or more)
- [X] Site Plan

Subdivision Fees
- Minor Review Fee ($200.00) $ 
- Major Review Fee ($500.00) $ 

Site Plan Fees
- Design Review Fee ($500.00) $ 
- Total Parking Spaces ($8.00/Space) $ 
- Dwelling Units ($16.00/Unit) $ 
- Dedication, Easement, Deed, Etc. Review Fee ($150.00) $ 
- Inspection Fee ($200.00) $ 

Additional/Other Fees
- Preliminary Fee ($200.00) $ 
- Concept Drawing Review Fee ($200.00) $ 
- Request for Waiver Review or Letter of No Impact ($200.00) $ 200.00 
- Revisions ($200.00) $ 
- Signing of Filing Plats ($150.00) $ 

Total $ 200.00

Signature of Agent of Applicant: [Signature]
Date: 1/30/17

SPECIAL PROVISIONS:
The Fee Schedule Check a box if the Camden County Treasurer after Applications are Determined Complete and Consistent with Municipal Review and Regulations. Fees paid are not refundable once the review process begins.

WILLIAM F. ZIEGLER
Attorney At Law
State of New Jersey
PAY TO THE ORDER OF  Treasurer of Camden County  $ 200.00

Two Hundred _________________________ xx/xx __ DOLLARS

MEMO
Application Fee
Block 12301, Lot 1.01 Gloucester Twp.
Northbrook Behavioral

[Signature]

HOLSTON, MacDONALD, UZDavinis, ZIEGLER, & MYLES / ATTORNEY BUSINESS ACCOUNT

1/30/17
$200.00
Treasurer of Camden County
Application Fee - Block 12301, Lot 1.01 - Northbrook Behavioral
Z-22192 - Northbrook
Mr. John Maselli  
Municipal Finance & Construction  
NJ Department of Environmental Protection  
401 East State Street, 3rd floor  
Trenton, NJ 08625

Re: NJDEP Expedited Review – Treatment Works Approval  
Recovery Centers of America – 1840 Peter Cheeseman Road, LLC  
1840 Peter Cheeseman Road; Block 14003, Lot 13  
Gloucester Township, Camden County, NJ  
Application for Treatment Works Approval – 23000 GPD  
ARH #50-52433

Dear John:

On behalf of Recovery Centers of America, RCA, we hereby submit the following documents for consideration of granting approval for sewer improvements for this major site plan:

a. CCMUA Resolution  
b. GTMUA Resolution  
c. Fee in the amount of $850.00 payable to Treasurer, State of NJ (CHECK 3739)  
d. TWA Checklist  
e. Receipts of Public Notification to Local Board and Environmental Commission  
f. Major Site Plans, revised February 13, 2017  
g. Technical Specifications, Water & Sewer, dated December 22nd, 2016  
h. Engineer’s Report, dated December 22nd, 2016, Revised January 17, 2016  
i. Estimates for Sewer Construction Cost  
j. Sewer Forms:  
   1. Checklist & fee calc sheet  
   2. Quad Location Map  
   3. WQM-003  
   4. WQM-006  
   5. TWA-1

Proposal:

The applicant requests an Expedited review for NJDEP approvals to expand the existing facility to accommodate for 125-total beds, resulting in an extra 23,000 gallons per day sewer flow.

The applicant is proposing to utilize the existing footprint and construct three new additions onto the existing structure as well as construct a 1-story treatment center building.
The applicant has received approvals from the local jurisdictions including Camden County MUA and Gloucester Township MUA for the proposed site improvements.

**Request Expedited Treatment Works Approval:**

The Developer wishes to obtain a state permit to install this 8-inch lateral into the existing public mains, in order to expand the existing rehabilitation facility to a total of 125 beds, with no other improvements to the system.

This application should fall within the threshold for 'expedited review.'

**Receipts of Notification:**

Attached are the white slips from the Post Office for Certified Mailings of the application and plans to the Planning Board Secretary as well as the Gloucester Township Environmental Commission.

Should you have any further questions, comments, or concerns regarding this project, please do not hesitate to contact me at 856-340-9920.

If you should require additional information or have any questions, please feel free to contact our office.

Sincerely,

[Signature]

Senior Client Manager
ARH Associates

TW/ajw
Enclosures – Originals and Check
cc: Jerry O-Connor, RCA (w/enc)
    Jack Plackter, Esq., Appl Attorney (w/enc)
    John Lombardo, RCA (w/enc)
    Gloucester Township Planning Board Engineer (w/enc)
    Gloucester Township Planning Board Secretary (w/enc – certified mail return receipt)
    Gloucester Township Clerk (w/enc – certified mail return receipt)
    Gloucester Township Environmental Commission (w/enc– certified mail return receipt)
Recovery Centers of America
2701 Renaissance Blvd
King Of Prussia, PA 19406

Customers Bank
3739
Date: 02/06/2017

Pay To
The Order Of Treasurer, State of New Jersey
***Eight Hundred Fifty Dollars***

Treasurer, State of New Jersey
125 West State Street
Trenton, NJ 08625
United States

Recovery Centers of America
V00599—Treasurer, State of New Jersey
Print As: Treasurer, State of New Jersey

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<th>Date</th>
<th>Reference Number</th>
<th>Amount Due</th>
<th>Amount Paid/Posted</th>
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</tbody>
</table>

Page 1 of 1
STATE OF NEW JERSEY
DEPARTMENT OF ENVIRONMENTAL PROTECTION
DIVISION OF WATER QUALITY

Treatment Works Approval Permit Application

Refer to Instructions on Page 4 and Provide All Applicable Information. Please Print or Type.

1. Applicant/Owner*

Name: Gloucester Township Municipal Utilities Authority
Telephone: (856) 227-8666

Permanent Legal Address: P.O. Box 216

City or Town: Glendora State: NJ Zip Code: 08029 E-mail: mhrynio@gmtua.com

* Applicant/Owner should be the eventual owner of the proposed Treatment Works.

2. Location of Activity

Name of Facility/Site: Recovery Centers of America

Street Address/Location: 1840 Peter Cheeseman Road

Lot No.: 13 Block No.: 14003

City or Town: Gloucester State: NJ Zip Code: 08030

Municipality: Camden County: Camden

3. New Jersey Licensed Professional Engineer

Name: Theodore Wilkinson N.J. License No.: 39607

Name of Firm, if employee: ARH Associates

Mailing Address: 215 Bellevue Avenue

City or Town: Hammonton State: NJ Zip Code: 08037

Telephone: (609) 561-0482 Fax: (609) 704-8011 E-Mail: twilk@arh-us.com

4. Estimated Construction Cost and Application Fee

A. Cost of treatment works proposed in this application: $45,580.80
(Attach a breakdown of the cost of all items related to the construction of the proposed treatment works).

B. Application Fee: $850.00 minimum per TWA Program "Fee Report and Fee Schedule for FY2008"
(In accordance with N.J.A.C. 7:1C-1.5 et seq., made payable to Treasurer, State of NJ, Environmental Services Fund).
5. OTHER REQUIRED PERMITS

If any of the following applications have been submitted for this project, provide the applicable information.

<table>
<thead>
<tr>
<th>Permit Type</th>
<th>Application Status</th>
<th>Application Date</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Pending</td>
<td>Approved*</td>
</tr>
<tr>
<td>Treatment Works Approval</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>Exemption From Sewer Ban</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Water Quality Management Plan Amendment</td>
<td></td>
<td></td>
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<tr>
<td>CAFRA</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Stream Encroachment</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Freshwater Wetlands</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>Tidal or Coastal Wetlands</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Waterfront Development</td>
<td></td>
<td></td>
</tr>
<tr>
<td>NJPDES Permits</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pinelands Certificate</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Delaware &amp; Raritan Canal Commission</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hackensack/Meadowlands Commission</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other Related Approvals</td>
<td>✓</td>
<td></td>
</tr>
</tbody>
</table>

( * If any of the above applications were approved, please provide a copy of the approval with this application. )

6. PROJECT DESCRIPTION (Brief Description of Proposed Treatment Works and Intended Use).

Site will be used as a rehabilitation center, for short and long term treatment, consisting of 125 total beds. There will be a installation of sewer main and sewer service laterals. The installation consists of 548 LF of 8" PVC sewer main, 122 LF of 6" PVC sewer laterals, and 100 LF of 4" PVC sewer laterals. The installation includes 5 manholes and the appropriate cleanouts and risers. The connections will be made into the existing sanitary system on site by way of 6" and 8" corings.
7. APPLICANT'S AGENT (Optional)

[Signature]

8. PROPERTY OWNER'S CERTIFICATION

I hereby certify that [Name of Property Owner] owns the property identified in this application. As owner, I grant permission for the activity to be permitted under this application and authorize the Department of Environmental Protection to conduct on-site inspections, if necessary. If the construction activity will take place in an easement, I certify that with this application, I presently have or will obtain permission of the property owner(s) prior to initiation of construction of this proposed treatment works.

[Signature] [Date]

Print or Type: Name and Position [Name and Title]

9. STATEMENT OF PREPARER OF PLANS, SPECIFICATIONS AND ENGINEER'S REPORT AND/OR ABSTRACT

I hereby certify that the engineering plans, specifications, and engineer's report and/or abstract applicable to this project comply with the current rules and regulations of the Department of Environmental Protection with the exceptions as noted.

[Signature] [Date]

Print or Type: Name and Position [Name and Title]
10. PROPER CONSTRUCTION AND OPERATION CLAUSE

I, the Applicant/Owner, Gloucester Township Municipal Utilities Authority, agree that the treatment works will be properly constructed and operated in accordance with the engineering plans, specifications and conditions under which approval is granted by the Department of Environmental Protection.

Signature of Applicant/Owner 1-25-17
Print or Type: Name and Position Raymond J. Caan, Executive Director

11. CERTIFICATION BY APPLICANT/OWNER

I certify, under penalty of law, that the information provided in this application and the attachments is true, accurate, and complete. I am aware that there are significant civil and criminal penalties for submitting false, inaccurate, or incomplete information, including fines and/or imprisonment.

Signature of Applicant/Owner 1-25-17
Print or Type: Name and Position Raymond J. Caan, Executive Director

INSTRUCTIONS FOR COMPLETING FORM TWA - 1

This form should accompany all Treatment Works Approval permit applications.

1. General Information - (items #1 through #4, #6) Complete the requested applicant and project information.
2. Other Required Permits (item #5) - Please list all permits issued for the subject project (in addition to the permits being applied for at this time).
3. Signatures (items #7 through #11) - All signatures must comply with N.J.A.C. 7:14A-4.9 and N.J.A.C. 7:14A-22.8. Where indicated under items #1, #10 and #11, the applicant/owner should be the eventual owner of the proposed treatment works. Item #8 shall be completed by the owner of the property.

Should you need assistance in completing the application, please call the appropriate phone number listed below:

- Bureau of Construction & Connection Permits
  (609) 984-4429
  Municipal Treatment Works, Industrial Treatment Works, Sewer Extension, Sewer Ban Exemption, Subsurface Disposal Systems

- Bureau of Nonpoint Pollution Control
  (609) 633-7021
  Alternate Design Septic Systems (design flow less than 2,000 GPD)
ENGINEER'S REPORT for DOMESTIC TREATMENT WORKS APPROVAL APPLICATIONS

INSTRUCTIONS
- Complete all applicable sections and certifications.
- Justifications for any exceptions from the regulations at N.J.A.C. 7:14A - 23 et seq. must be submitted. (Additional sheets may be attached if necessary.)
- All supplemental information required to be submitted along with this engineer's report must be signed, sealed, and dated by a professional engineer, licensed to practice in the State of New Jersey.
- For Treatment Works other than collection and/or conveyance, please attach a separate Engineer's Report in accordance with N.J.A.C. 7:14A - 23.5.

GENERAL INFORMATION

Applicant: Gloucester Township Municipal Utilities Authority  Municipality: Gloucester Township
Project Name: Recovery Centers of America  County: Camden

Name of Receiving Sewage Treatment Plant: CCMUA Delaware #1 Water Pollution Control Facilities
NJPDES Permit Number: NJ0026182
Effluent Receiving Waters: Delaware River

Scope of Project:
Site will be used as a rehabilitation center, for short and long term treatment, consisting of 125 beds. There will be an installation of sewer main and sewer service laterals.

The installation consists of 548 LF of 8" PVC sewer main, 122 LF of 6" PVC sewer laterals, and 100 LF of 4" sewer laterals. The service laterals service a total of 25,482 sf of new building. The installation includes 5 manholes and 3 services. The site already has a 30,000 sf building on the property with existing sewer service.

Contributory Flow: For assistance in completing this chart, refer to N.J.A.C. 7:14A - 23.3.

<table>
<thead>
<tr>
<th>Establishment Type</th>
<th>Number of Measurement Units</th>
<th>Gallons per Day per Unit</th>
<th>Projected Flow (G.P.D.)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Institution Rehab Building Additions</td>
<td>125 Beds</td>
<td>X 175</td>
<td>= 21,875</td>
</tr>
<tr>
<td>Gymnasium/ Fitness Center</td>
<td>1</td>
<td>X 600</td>
<td>= 600</td>
</tr>
<tr>
<td>Outpatient Services Building (1-Story)</td>
<td>3850 SF</td>
<td>X .100</td>
<td>= 385</td>
</tr>
</tbody>
</table>

Combined Projected Flow: 0.023 M.G.D.
Existing Contributory Flow (if any): 0 M.G.D.
TOTAL FLOW: 0.023 M.G.D.
## 1. WASTEWATER CONVEYANCE SYSTEMS

### (A) GRAVITY SEWER SYSTEMS

<table>
<thead>
<tr>
<th>Diameter (inches)</th>
<th>Total Length (feet)</th>
<th>Material Type</th>
<th>&quot;n&quot; Value</th>
<th>Max. MH Spacing (feet)</th>
<th>Min. Slope (%)</th>
<th>Max. Velocity (ft/sec)</th>
<th>Max. Capacity (M.G.D.)</th>
</tr>
</thead>
<tbody>
<tr>
<td>8&quot;</td>
<td>546</td>
<td>PVC</td>
<td>.010</td>
<td>400</td>
<td>.4</td>
<td>4.5</td>
<td>0.564</td>
</tr>
</tbody>
</table>

1. What is the minimum cover (as measured from the top of the pipe to the grade elevation) provided along the entire sewer line? 4 ft.
2. What is the infiltration and/or exfiltration limit for testing purposes (gallons per inch of pipe per mile per day)? 50 gpd-mi/in.

3. Are sewers within 100 feet of a public water supply well or a below-grade reservoir? YES
4. Are sewers located at least 10 feet horizontally from potable water lines and/or at least 18 inches below potable water lines and in separate trenches, including crossings? YES
5. Are sewers crossing streams located within 10 feet of a stream embankment encased in concrete? YES
6. Is a drop pipe provided for sewers entering manholes above the manhole invert wherever the difference in elevation is two feet or more? YES
7. Are all manholes located more than 100 feet from a public water supply well or a below-grade reservoir? YES
8. Are watertight covers used where street elevations are less than 10 feet above the North American Vertical Datum of 1988 and/or where the top of a manhole may be flooded by street runoff or high water? YES
9. Are the sanitary sewers designed to carry at least twice the estimated average projected flow when flowing half full? YES
10. Have adequate provisions been made for the ventilation of manholes? YES
11. If siphons are part of this project, are they in conformance with N.J.A.C. 7:14A - 23.7? YES
12. Are the immediate downstream sewer lines constructed? YES

### (B) PUMPING SYSTEM: Submit a Pump Station Design Report, which should include, at a minimum, the basis for the following: (a) pump selection; (b) sizing of force main and velocity calculations; (c) total dynamic head; (d) pump station performance curve and (e) wet well detention time.

<table>
<thead>
<tr>
<th>Average daily flow:</th>
<th>N/A</th>
<th>GPD</th>
<th>Surface area of wet well:</th>
<th>( t^2 )</th>
<th>minutes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Peaking factor:</td>
<td></td>
<td></td>
<td>Wet Well Detention Time:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Peak design flow:</td>
<td></td>
<td></td>
<td>TDH of pump:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of pumps:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Design capacity of pump station (with the largest pump out of service):</td>
<td></td>
<td>GPM</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
1. WASTEWATER CONVEYANCE SYSTEMS

(B) PUMPING SYSTEM (continued)

FORCE MAINS

<table>
<thead>
<tr>
<th>Diameter (inches)</th>
<th>Length (feet)</th>
<th>Material Type</th>
<th>Velocity (ft/sec)</th>
</tr>
</thead>
<tbody>
<tr>
<td>N/A</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

1. What is the minimum cover (as measured from the top of the pipe to the grade elevation) provided along the entire force main? __________ ft
2. Specify the method of screening at the pumps.
3. Where is the ultimate location of the alarm for high water conditions, power failures, and mechanical breakdowns?
4. Specify the type of back-up power source provided.
5. Is adequate light and ventilation provided at the pump station? [YES ☐ NO ☐ N/A ☐]
6. Are air and/or vacuum release valves provided on the high points of the force main? [YES ☐ NO ☐ N/A ☐]
7. Are adequate freshwater wash-down facilities provided? [YES ☐ NO ☐ N/A ☐]
8. If a domestic water service connection will be utilized for wash-down purposes, is it protected by a backflow prevention device? [YES ☐ NO ☐ N/A ☐]
9. Are shut-off valves on suction and discharge piping and check valves on discharge lines provided? [YES ☐ NO ☐ N/A ☐]
10. Is the base of the pump station wet well sloped toward the pump suction? [YES ☐ NO ☐ N/A ☐]
11. Does the alarm system provide for competent assistance on a 24 hour basis? [YES ☐ NO ☐ N/A ☐]
12. Is the pump station adequately protected from flooding? [YES ☐ NO ☐ N/A ☐]
13. Is the dry well provided with a sump pump? [YES ☐ NO ☐ N/A ☐]

I am a professional engineer licensed by the New Jersey Board of Professional Engineers and Land Surveyors to practice in New Jersey. I certify that the proposed treatment works, as designed, meets the requirements of N.J.A.C. 7:14A - 23 et seq., other than the exceptions as noted.

I hereby certify that the information provided in this engineer's report and attachments hereto, is true, accurate, and complete. Exceptions attached [YES ☐, NO ☐]?

Signature of Engineer:

[Signature]

Name and Date:
(Print or Type)

Firm Name:

ARH Associates, Inc.
### Is the following information submitted with this engineer's report?

<table>
<thead>
<tr>
<th></th>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>A complete description of the selected wastewater treatment system.</td>
<td></td>
</tr>
<tr>
<td>2.</td>
<td>For the modification of an existing system which has not previously been granted a treatment works approval (TWA), the capacities of the existing units and a brief description of the operation of each, and a statement concerning which units are existing and which are proposed at the time of the application. If there exists a previously issued TWA approval for the subject facility, submit the date of issuance and the TWA number.</td>
<td></td>
</tr>
<tr>
<td>3.</td>
<td>Hydraulic profiles of the flow of wastewater through the system.</td>
<td></td>
</tr>
<tr>
<td>4.</td>
<td>A unit by unit mass balance for all discharge parameters.</td>
<td></td>
</tr>
<tr>
<td>5.</td>
<td>The ultimate disposal location of all effluent.</td>
<td></td>
</tr>
<tr>
<td>6.</td>
<td>The basis and computations for average and peak flow requirements.</td>
<td></td>
</tr>
<tr>
<td>7.</td>
<td>The expected composition of the influent and effluent from the treatment system including the average, maximum and minimum values of the pollutant parameters specified in the facility's NJPDES permit/DAC.</td>
<td></td>
</tr>
<tr>
<td>8.</td>
<td>An evaluation of the quantity and quality of any and all residuals generated and projected to be generated, including a hydraulic profile and unit by unit mass balance for the flow of residuals through the system.</td>
<td></td>
</tr>
<tr>
<td>9.</td>
<td>Documentation of adequate storage and handling facilities for residuals.</td>
<td></td>
</tr>
<tr>
<td>11.</td>
<td>Details of flow monitoring and control, alarm systems, auxiliary power, storage facilities for treatment chemicals and wastes, and plans for bypassing units during construction or maintenance.</td>
<td></td>
</tr>
<tr>
<td>12.</td>
<td>The basis and computations for the projected wastewater flow.</td>
<td></td>
</tr>
</tbody>
</table>

---

I am a professional engineer licensed by the New Jersey Board of Professional Engineers and Land Surveyors to practice in New Jersey. I certify that the proposed treatment works, as designed, are adequate to meet all applicable final NJPDES permit limitations contained in the current NJPDES Discharge Permit No. NJ0026182. In addition, I certify that the proposed treatment works, as designed, meets the requirements of N.J.A.C. 7:14A - 23 et seq., other than the exceptions as noted. I hereby certify that the information provided in this engineer's report and attachments hereto is true, accurate, and complete. Exceptions attached [YES ☐, NO ☐ ]?

---

Signature of Engineer*  

Professional Engineer's Embossed Seal  

Name and Date:  
(Print or Type)  

Firm Name:  

Theodore Wilkinson, PE  

ARH Associates, Inc.

* This certification may not be completed until the effective date of the associated final NJPDES Discharge Permit.
February 1, 2017
File No. 15073

Sent Via Certified Mail

Gloucester Township Planning Board
Chews Landing Clementon Road at Hide Lane
P.O. Box 8
Blackwood, NJ 08012

Re: Proposed 6" Sewer Force Main
Block 16504, Lots 10, 11 & 12-TM Sht. No. 165
Jarvis Road
Gloucester Township, Camden County, New Jersey

Dear Planning Board:

This letter is being submitted to inform you that a force main application (TWA) has been submitted for approval to the NJDEP Division of Water Quality. The proposed 6" Force Main through Peachtree Lane will re-direct discharge from the Jarvis Road Sump Pump Station and connect to the gravity sewer system on Sturbridge Drive as there is available capacity to that portion of the GTMUA collection system.

Sincerely,

Lee Brahин,
Owner
Brahин Properties, Inc.
215-563-7111