Chairman McMullin called the meeting to order. Mr. Lechner read the commencement statement.

Roll Call:

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<td>Mr. Scarduzio</td>
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<td>Mrs. Chiumento</td>
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<tr>
<td>Mr. Rosati</td>
<td>Present</td>
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<tr>
<td>Mr. Acevedo</td>
<td>Absent</td>
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<tr>
<td>Mr. Treger</td>
<td>Late Arrival 8:10 pm</td>
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<td>Ms. Scully</td>
<td>Present</td>
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<td>Chairman McMullin</td>
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Chairman Simiriglia had the professionals sworn in:
Also Present: Mr. Anthony Costa, Zoning Board Solicitor
Mr. James Mellett, P.E., Churchill Engineering
Mr. Ken Lechner, Township Planner

Mr. Treger sits in for Mr. Acevedo at 8:10 pm (in time for the last application #152041PMSFMSa1DM)

MINUTES FOR ADOPTION

Zoning Board Minutes for Wednesday January 27, 2016.

A motion to approve the above mentioned minutes was made by Mr. Scarduzio and seconded by Mr. Rosati.

Roll Call:

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<td>Mr. Rosati</td>
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Minutes Approved.

Zoning Board Minutes for Wednesday February 10, 2016.

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Minutes Approved.
RESOLUTIONS FOR MEMORIALIZATION

Zoning Board of Adjustment 2015 Annual Report

#162003D                        #162001BD
Arthur Steiner                   Brahin Properties, Inc.
Bulk C Variance                 B "Interpretation"/Use "D" Variances
Block: 16102 Lot: 32            Block: 16504 Lot: 10, 11, 12

A motion to approve the above mentioned resolutions was made by Mr. Scarduzio and Seconded by Mr. Rosati.

Roll Call:

Vice Chairman Simiriglia        Yes
Mr. Bucceroni                   Yes
Mr. Scarduzio                   Yes
Mr. Rosati                      Yes
Chairman McMullin               Yes

Resolutions Approved.

APPLICATIONS FOR REVIEW

#152057C
James F. Clark, Jr.
Zoned: NVBP
Bulk C Variance
Block: 18301 Lot: 10.01
Location: 863 Williamstown-Erial Rd, Sicklerville
30' x 14' (420 sq. ft.) wood shed.

Mr. Costa addresses Mr. William J. Volpa. Mr. Costa explains to Mr. Volpa that Mr. Clark must be present or the application can not be heard. Mr. Clark is not present tonight. Mr. Costa informs Mr. Volpa that Mr. Clark must re notice and the application will be tabled and the applicant must renotice.

A motion to table the above mentioned application was made by Mr. Rosati and seconded by Mrs. Chiumento.

Roll Call:

Vice Chairman Simiriglia        Yes
Mr. Bucceroni                   Yes
Mr. Scarduzio                   Yes
Mrs. Chiumento                  Yes
Mr. Rosati                      Yes
Chairman McMullin               Yes

Application Tabled.

#162009C
James & Bryce Nelson
Zoned: R3
Bulk C Variance
Block: 18306 Lot: 1
Location: 2 Sandstone Dr., Sicklerville
240 sq. ft. storage shed, 5' fence with setbacks.
Mr. Costa swears in Mr. James & Bryce Nelson.
Mr. Bryce Nelson states the contents for the shed are too large for anything smaller and if they
followed the ordinance the fence would be in the center of the pool. They live on
a half acre, corner property that has an irregular shape.
Mr. Lechner states they had applied for the pool fence and it was going to have to be a 40'
setback, so he suggested asking for the fence variance while they were here for
the shed.
Mr. Mellett states the survey from the sale of the home shows the fence would not be a site triangle
issue.

Open to the Public:
No Comments.

A motion to approve the above mentioned application was made by Mr. Rosati and seconded by
Mr. Scarduzio.

Roll Call:

Vice Chairman Simiriglia  Yes
Mr. Bucceroni  Yes
Mr. Scarduzio  Yes
Mrs. Chiumento  Yes
Mr. Rosati  Yes
Chairman McMullin  Yes

Application Approved.

#162006C
Lisa Crowley
Zoned: R3
Bulk C Variance
Block: 21002 Lot: 18
Location: 18 Persimmon St., Sicklerville
10’ x 16’ wood shed w/ setbacks

Mr. Costa swears in Ms. Lisa Crowley.
Ms. Crowley states the shed has been there for 13 years and she applied for the variance last
week. She's afraid the shed would fall apart if they tried to move it so it would
have to be disassembled to be moved; it is 2’ from the side of the home.

Mr. Lechner reads the building sub code: the shed will have to be fire rated for 1 hour and fire
rated from inside and out.

PUBLIC PORTION:
Mr. Robert Salevsky lives next door and believes the shed has been up around 10 years.
He states it's on the property line and has become a eyesore because you can't get behind it to
clean up. The gutters have fallen off and the neighbors can’t maintain the shed.
He believes the gutters are 4’ off the property line. Mr. Salevsky has never liked the
shed but this past summer there was a rodent issue (skunks) that were living under
the shed. Mr. Salevsky hands the board members pictures of the shed.

Mr. Rosati asks Mr. Salevsky why he complained about the shed after 13 years.
Mr. Salevsky states there was an incident with a dog, now the fence is a problem and 9 months
ago there was another incident with the dog. Presently the Crowley’s yard is
sealed so they don’t have any more dog problems but they can't maintain the
shed because they can’t get around it; it's so close to the fence and house.

Mrs. Chiumento asks Ms. Crowley what base the shed is on.
Ms. Crowley states the shed has a wood base.
Mr. Bucceroni asks Ms. Crowley which way the water flows.
Ms. Crowley states to the side of the property.
Mr. Bucceroni asks Ms. Crowley if the application was approved she would route the water so it doesn’t go on the neighbors’ property and clean around it.
Mr. Scarduzio asks Mr. Salevsky if he would be satisfied if Ms. Crowley maintained the shed.
Mr. Bucceroni asks why the fence caused a problem; couldn’t they just unscrew the fence for access to the shed.
Mr. Lechner asks what is stopping Ms. Crowley from moving the shed.
Ms. Crowley states it’s too expensive to move.
Vice Chairman Simiriglio asks if there is anything else in the yard not shown on the survey.
Ms. Crowley states “no”.
Vice Chairman Simiriglio states there is plenty of room to move the shed and suggest that’s what they should do.
Mrs. Chiumento asks about the height of the shed.
Ms. Crowley isn’t sure.
Vice Chairman Simiriglio states the height is more of a problem.
It is determined by the pictures that the shed is NOT 16’ high.
Mr. Scarduzio asks about any water issues.
Mr. Salevsky states there are no water issues it pools on her side.
Chairman McMullin asks Mr. Salevsky if clean-up is the biggest problem.
Mr. Salevsky states the garbage accumulates under the shed and he can see it from his side of the fence.
Mr. Lechner states there are fire code and base requirements even if they don’t move the shed.
Her shed is 168’, which is permitted, 5’ off the property line and 10’ from her house.
Ms. Crowley asks if she’ll need a permit to move it.
Mr. Lechner states “yes”.

A motion to deny the above mentioned application was made by Vice Chairman Simiriglio and seconded by Mr. Scarduzio.

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Application Denied.

#162008C
Susan L. Fago
Zoned: R3
Bulk C Variance
Block: 16004 Lot: 1
Location: 30 Kendrick Ave., Erial
4’ chain link fence w/ setbacks
6’ wood fence w/ setbacks

Mr. Costa swears in Ms. Susan Fago.
Ms. Fago states she can’t conform to the ordinance because the fence would be in the middle of her yard. She wants the fence to keep her grandchildren and dogs safely in the yard. She also requests the black chain link in the back because she would like to keep the view as unobstructed as possible and feels the black chain link would practically be invisible.

Mr. Bucceroni discusses the location across from Verizon off Jarvis.
Mr. Mellett states there are no site impacts.

Public Portion:
Mr. Alfred Taubenberger states he is for the fence.

A motion to approve the above mentioned application was made by Mr. Scarduzio and seconded by Mrs. Chiumento.

Roll Call:

- Vice Chairman Simiriglio: Yes
- Mr. Bucceroni: Yes
- Mr. Scarduzio: Yes
- Mrs. Chiumento: Yes
- Mr. Rosati: Yes
- Chairman McMullin: Yes

Application Approved.

*Mr. Treger arrives at 8:20 pm and is seated for Mr. Acevedo.

#152041PMSFMSa1DM
1840 Peter Cheeseman Rd. LLC
Zoned: IN
Minor subdivision & Final Major Site Plan; Use "D" Variance
Block: 14003 Lot: 13
Location: 1840 Peter Cheeseman Rd., Blackwood
Residential Healthcare Facility/ Drug & Alcohol Rehab Facility

Mr. Plackter (Esq.) discusses the application. He states they will present a comprehensive demonstration to show how the rehab facility will be a successful contribution to Gloucester Township. The long term care facility will give successful outcomes to patients with critical needs along with the long term facility. There are many statistics for the need of addiction centers. Mr. Plackter explains how the rehab center and long term care facility fit into an IN zone. The facility will have 335 beds in total; 125 patient beds; cyber cafe; gym facility etc... Phase II would include 192 beds in a long term treatment centers. Which will include 192 beds with 14 supervisor beds. The Use Variance would be requested for the Phase II of the application; Long Term Treatment Centers. They are going forward with the use variance even though they don't believe they need one as it is a permitted use.

- continuum of care / phase II,
- treatment of disabled persons,
- across from Camden County College which is beneficial,
- legal obligation for the disabled.

Mr. Costa swears in Mr. Plackter’ witnesses:
1. Dr. DeShield : MD will explain the need for the facility
2. Dr. Curese: PHD clinical director
3. Mr. Wilkenson: PE
4. Mr. Terence Combs: Planner
5. Mr. Brian O’Neil: founder

Dr. DeShields:
- has visited the site,
- Dr. DeShields has lived in Blackwood since 2000,
- medical internal medicine doctor,
- 1997 certified drug addiction & alcohol addiction,
- has practiced addiction medicine in Camden County for 25 years,
- substance and addiction disorders,
- he medically treats for withdrawal,
- his facility is on the Black Horse Pike in a medical zone by the eye center,
- a disease that can not be cured but can into a long term remission,
- Dr. DeShields explains the treatment of his patients, and states the medical center on Peter Cheeseman will have medical care for withdrawal, and continuum care with the residential units for after detoxification. This would create a new level of care and progress for the patient. This will create a move of high level of care to partial care to outpatient in one facility. Sober living is usually a segment that is ignored in New Jersey.

- the model offers continuity to connect with the community and is essential for healing of the patient and family,

- Gloucester Township needs this facility along with other treatment centers,

- individuals would have to travel 200 miles to get this kind of treatment,

- patients don’t get the continuum of care that is needed,

- his concept is that they are still under treatment in the Phase II section of the applicants’ plan,

- being near Camden County College lends itself to synergy as CCC has substance abuse certification certificate courses.

- in his opinion this disease is killing middle aged white males,

- There is no negative impact: drug addicts won’t hang out here they can only receive treatment.

Mr. Costa asks Dr. DeShields some questions:

Mr. Costa asks if there aren’t any facilities within 200 miles with a sober living facility.
Dr. DeShields states a certain schedule will have to be followed.
Mr. Costa asks what percentage of patients go onto residential living.
Dr. DeShields states the 124 bed facility is concentrated treatment with no freedom.
Mr. Costa states then there is no movement in the 125 bed facility.
Dr. DeShields states there may be individual passes given to see family.
Mr. Costa reviews treatment centers in the Tri County area:
- Seabrook House
- Light House
- St. Mary’s
- Princeton House
- Hampton Institute is mental and addiction.
- MorWorth in VA is an impatient facility and apartment living.
Mr. Costa is the long term care a convenience for patients.
Dr. DeShields states “no” but if there are no proper living facilities for the patient to return to they have to return to high risk areas.
Mr. Costa if there are any facilities like this in New Jersey.
Vice Chairman discusses the difference between a diabetics care with no resident component.
Dr. DeShields states the diabetic gets sent to the hospital and steps down to acute care along with members of the community help the diabetic patient (nurses and home care). An addict can not just go to one of the above mentioned places. They have to be covered by insurance.

Mr. Bucceroni asks the doctor the rate of failure.
Dr. DeShields states a patient on heroin recidivism rate is about 65% to 70%.
Vice Chairman Simiriglia asks the Dr. DeShields if this facility with the residential component will be covered by insurance companies.
Dr. DeShields states there are levels of care and the insurance companies will tell you how much will be covered.
Mr. Scarduzio asks if there is a patient at the main facility and they want to move to Phase II and the insurance company doesn’t cover it what will happen.

Dr. DeShields discusses intense case management.
Mr. Plackter (Esq.) states the relapse rate is fairly high.
Dr. DeShields agrees and states the relapse rate will drop with longer treatment.
Mr. Plackter (Esq.) states there is less restrictive care just not in this form.
Mr. Bucceroni asks if the facility in Williamsburg VA similar.
Dr. DeShields states Rutgers University has started an addiction help center for the students of Rutgers for drugs/binge drinking etc., and they are treated on campus. The facility in Farley VA is in a rural/suburban area within 2 to 3 miles.

Mr. Costa asks why not leave the patients in the hospital setting for the 120 days instead of the residence setting.

Dr. DeShields states the patients must get on with life and make better decisions.

Mr. Costa asks what will become of the patients who don’t go to Phase II.

Dr. DeShields states not all patients will need that level of care.

Dr. Carise (PHD) outpatient treatment/international clinical researcher/Fellowship at Penn.

Develops treatments for patients, has worked with the White House/The UN/Phoenix House.

A1 = Qualifications of PHD,
- Dr. Carise designs treatments,
- what goes on in the 4 buildings:
  a. slightly decreased structure,
  b. will relapse within a month without the extended treatment,
  c. 8 am to 10 pm treatment in a structured environment to learn how to self soothe,
  c. the more treatments the better.
  e. short drug use careers can use the outpatient treatment,
  f. they will be treating the top 1% to 2% that will not do well with 30 days of treatment,
  g. they can not come and go as they please but they can earn passes for dinner with family,
  h. offering a 1 year treatment program
  i. schedule of seminars and workshops,
  j. primary group 5 days a week,
  k. special groups once a week ex: LGBT, men, women etc..
  l. 70% young adults 18 to 29yr. olds.

A2- treatment schedule for Phase II
A3- Jim McKay addiction continuum care
A4 Betty Ford continuum care

Security: have plans for security; If patients want to leave they would have to call transportation, there will be room and bed checks, nursing and recovery in both settings, patients will be checked every hour, motion detectors will be installed, along with recovery support staff.

Overdose rate: Gloucester Township has the 4th highest death rate in Camden County.

These 4 buildings will give the patients the staff they need to succeed like medical doctors and psychiatrists.

Mr. Costa asks where the sample schedules would actually be held.

Dr. Carise states in the 4 buildings, group therapy, addictive therapy will be going on in the 4 buildings while the patients are there.

Mr. Costa questions minimum treatment.

Dr. Carise states everyday for 8 hours is treatment, they can not go to work, can earn a pass to go to dinner with a drug screening when they return, treatment will be 8 hours a day 7 days a week.

Mr. Costa states every time the applicant comes before the board it's a different story. Will court mandated patients be permitted.

Dr. Carise states some may come for outpatient treatments after work but won't be living in the 4 buildings.

Mr. Costa asks what percentage would use the 4 buildings.

Dr. Carise hopes 90% will use it, but she's not sure as there has never been anything like this before.

Halfway houses are used by 75% to 80% of patients.

Mr. Costa questions above estimations,

Vice Chairman Simiriglia asks if there will be instances where you would use the 125 bed building and the 4 buildings together.

Dr. Carise states typically no.
Vice Chairman Simiriglia suggests there may not be enough room for treatment in the Phase II buildings.

Chairman McMullin asks who will be doing the bed checks.
Dr. Carise states the bed checks will be done every hour by supervisors.
Mr. Bucceroni discusses 70% success rate out of Phase II.
Mr. Mellett asks the number of employees.
Dr. Carise states there is a 1 to 3 ratio: doctor to patients.
Mr. Mellett states if the residents can’t leave there isn’t as great a need for parking.
Dr. Carise states there is no need for a car, they won’t be encouraging cars and they must be picked up for dinner.

Mr. Rosati discusses dinner being a privilege and who will be administering the drug test.
Mr. Lechner asks what happens if the patient does test positive.
Dr. Carise states they will treat having a glass of wine vs. bringing drugs or alcohol back with them will treated very differently.
Mr. Lechner asks what happens if a patient wants to stay after the 90 day treatment.
Dr. Carise states treatment after 4 months isn’t as beneficial, she would allow the patient to stay but there would be a more intense follow-up with that patient.
Chairman McMullin asks the minimum stay in Phase II.
Dr. Carise suggests a year but there really isn’t a minimum or maximum time frame.

Mr. Ted Wilkenson (PE):
A5 - Qualifications
- Mr. Wilkenson has been to the site. He has also reviewed the zoning board minutes and master plan; has reviewed the letters by Mr. Mellett and Mr. Lechner.
A6 - color rendering: 26 acres
- 208 parking stalls required,
- 2 to 3 months there would be no driving,
- 129 parking stalls for Phase II,
- total employees: 162 in the main building: 16 employees in Phase II,
- one shift 97 employees at a time and 16 employees in Phase II,
- reviews: storm drainage, utilities, parking, curbing, lantern style lighting, 4’ walks on County highway with shade 278 shade trees, will try to save as many mature trees as possible.
Mr. Lechner states the applicant has agreed to comply to everything in his letters.
Mr. Mellett states the applicant has agreed to comply with his letters as well.
- The county is reviewing the letter and they will have the response in a couple of weeks, they may have to widen the road a little.
Phase II is 4 buildings and a parking lot which might not happen for 1 to 2 years.
Mr. McMullin asks if family members can stay overnight.
Mr. Wilkenson states only patients will be there overnight everyone else will just be visitors.
Mr. Costa inquires about the fire Marshall.
Mr. Wilkenson states the Fire Marshall wants 360 degree access to all buildings. There is a 20’ drop off behind the building and they want to make sure there is a safe 360 access with a safe shelf.
Mr. Lechner states the ordinance does say 278 trees but they can work something out. It can be any trees they don’t all have to be shade variety. Mr. Wilkenson states he thinks the bulk regulations for zoning have been met. He also agrees that the use is a permitted use.
The overall floor plan for 125 bed facility fits the bulk requirements.

A8 - proposed grading plan;
- includes cyber cafe with concerns addressed,
- detention basin is redesigned,
- flood hazard permits.
A9 - rendering of uses inside the main building.
A11 - elevations for the front of the treatment centers.
Mr. Lechner questions the architects 150 beds vs. testimony of 125 beds.

5 MINUTE RECESS:

Roll Call:
Mr. Mellett states a lot of engineering details can be addressed between pre and final approvals. The ordinance states curbing must be throughout the parking lot.

Mr. Wilkenson states the front parking lot will be Belgian block and the islands will be curbed. The outskirts they would prefer to leave "grass to swale"; relief to be partial and not to exceed 20%.

Mr. Mellett discusses the north side adjacent to the basin. Mr. Lechner has no objection on the radius and typically the edge of the pavement is thicker. Mr. Mellett and Mr. Wilkenson discuss the basin and fencing. Mr. Wilkenson states it will be a dry basin and would like a waiver for the fencing, he believes aesthetically it will look better and they will have buffering on 3 sides.

Mr. Mellett has no objection to the fence waiver. Mr. Mellett continues with the minor subdivision component; all items were agreed to and there is no need to get into the details.

Mr. Wilkenson states the 352 parking spaces vs. the 246 required. The 246 parking spaces will be available the first day with creating a banking system for the other 80 parking stalls (bonded).

Mr. Mellett states there has been some confusion about patients being able to come and go that's not true. Residential treatment centers don't fit into the ordinance. They can discuss the parking stalls between preliminary and final approval.

Mr. Lechner discusses the 100 parking spaces in the middle of the lot and if the Board feels confident enough to approve that number. He doesn't like to see large empty parking lots if it's not going to be utilized.

Mr. Wilkenson states the phasing plan can be discussed: 97 parking stalls for employees and 35 parking stalls for visitors.

Mr. Mellett states the outpatient facility is generating how many trips per day and you have the room for parking; sound numbers need to be locked down.

A12: aerial view of entire site:

Mr. Bucceroni questions Mr. Wilkenson about family members staying overnight.

Mr. Wilkenson states no family members will be staying overnight.

Dr. Raushaud PE (traffic engineer):

A13 proof of qualifications:
- Dr. Raushaud performed the traffic study, he went along the county road between Hickstown and College drive and took driveways into account.
- before and after conditions; along with all levels of service with drives servicing the site.
- ITE depended on and common sense,
- traffic impact is negligible,
- compared to schools and hospitals which all generate more trips; a hospital would generate twice as many trips.
- 97 employees that arrive between 6:30 am to 7 am; peak hours are 7:30 am to 8:30 seen as rush hour and this locations peak times are 9:30am to 10:30am; there is good lane use existing.

Mr. Mellett summarized the study and county road approval.

A14 traffic study
Mr. Lechner states the local ordinance requests an impact statement; please amend report to add them.
Dr. Raushaud recommends that as a condition and will deal with it at final approval.

Terrance Combs - Planner (PP).
A12 aerial photo of site
- Mr. Lechner’s and Mr. Mellett’s reports were reviewed,
- Mr. Combs reviews 2015 application.

A16 resolution from March 2015: January 13, 2016 upheld not allowed:
- Campus settings and residential settings are part of a hospital setting.
Use Variance: positive criteria:
- residential drug and alcohol is a beneficial use,
- valve to the community, hospitals, schools, child care, wind and solar power,
- drug rehab approved by NJ state,
Mr. Combs reads legislation 28B-1.
- there is a need for the use,
- site is well suited for the use,
- discusses the wetlands buffer.
Negative Criteria:
- Mr. Combs doesn’t see any negative criteria,
- appropriate area,
- surrounding properties discussed,
- significant buffers,
- no extra traffic noise,
- should be a permitted use under the zoning plan; institutional use.
1. public interest
2. potential of detrimental use (affects from use),
3. conditions to mitigate,
4. public interest vs. detrimental effects.
Reasonable accommodation: people are suffering from addictions, they are considered disabled and covered under the Fair Housing Act.
- variance is considered reasonable and there is a need for the facility.

Mr. Costa:
- inherently a beneficial use as a hospital but does that use extend to these 4 buildings. There are none of these facilities in New Jersey and it is a big leap from addiction/disabled in this application to Phase II of this project. The testimony is self serving as the applicant has a significant interest in it’s approval.
Mr. Combs states Phase II isn’t a separate use it’s the same as the main building.
Mr. Costa states ordinance 419 specifically states “presently existing in the municipality”. Mr. Combs states he has no idea what that means.
Mr. Costa discusses a treatment center similar to the hospital and reads from the “Orange” case.
Mr. Combs doesn’t see separate buildings as a separate use.
Mr. Costa explains the board is not against the 120 facility in any way. To be considered a residential treatment center: definition is: 24 hour consecutive hours of treatment.
Mr. Combs discusses the use variance criteria.

Mr. Lechner asked if the Fair Housing Act treatment centers would apply to credits for COAH. Mr. Combs isn’t sure.
Mr. Plackter doesn’t believe they do, the Fair Housing Act for the disabled isn’t a component to COAH.

Mr. Costa discusses the specific intent of the ordinance and Phase II of this project.
Mr. Costa and Mr. Combs discuss accessory use.

A15 Mr. Combs resume for record.
A17 ordinance upholding Mr. Lechner’s decision.
At 11pm this application was continued to the next Zoning Board of Adjustment Meeting; 3/9/2016.

No re advertisement needed:

Will start with Mr. O’Neill and Public Portion on 3/9/2016.

A motion to Adjourn was made by Mr. Scarduzio and seconded by Mr. Bucceroni.

Respectfully Submitted, Jean Gomez, Recording Secretary.