2274-65A

WOOD-RIDGE PLANNING BOARD
Municipal Building
85 Humboldt Street
Wood-Ridge, NJ 07075

APPLICATION FOR DEVELOPMENT

APPLICANT: Woodridge Salonsuites LLC

Property/Street Address	Tax Map Block	Tax Map Lot	Zoning Classification
20 Rosie Square	339	1	WRSA

1. Application for:
   (Check appropriate boxes) and attach appropriate detail page(s)

	Minor Subdivision Approval
	Preliminary Major Subdivision Approval
	Final Subdivision Approval
	Minor Site Plan Approval
	Preliminary Major Site Plan Approval
	Final Major Site Plan Approval
	Amendment or Revision to an Approved Site Plan
	Conditional Use Approval
	Issuance of a Permit for a structure in bed of a mapped street, public drainage or flood control basin or public area
	Issuance of a permit for a lot lacking street frontage
	Design Waivers
	Variance
	Use Variance
X	Other (specify) Site Plan Waiver (Change in Tenancy)

To be completed by Borough Staff only

Date Filed:

No: _____ Application Fee: _____ Escrow Deposit: _____	Scheduled for: Hearing: _____

2. APPLICANT

NAME	Woodridge Salonsuites LLC
ADDRESS	11 Hancock Street, Parsippany, NJ 07054
TELEPHONE NUMBER	551-208-4622
FORM OF BUSINESS:	
Individual	
Corporation	
Partnership	
Limited Liability Company	X
Other (Specify)	

3. APPLICANT'S DISCLOSURE STATEMENT

Pursuant to N.J.S. 40:55D-48.1, the names and addresses of all persons owning 10% of the stock in a corporate applicant or 10% interest in any partnership applicant must be disclosed. In accordance with N.J.S. 40-55D-48.2 that disclosure requirement applies to any corporation or partnership which owns more than 10% interest in the applicant followed up the chain of ownership until the names and addresses of the non-corporate stockholders and partners exceeding the 10% ownership criterion have been disclosed. (Attach pages as necessary to fully comply)

NAME	ADDRESS	INTEREST
Neel Patel	Same as Applicant	> 10%
Ankit Patel	Same as Applicant	> 10%

4. APPLICANT'S STANDING Applicant has standing to make this application because:

Applicant has a contract or lease (attach copy)	X See Exhibit B attached.
Applicant is the owner	
Other (specify)	

5. PROPERTY INFORMATION

Owner's Name: Westmont Station Retail I Urban Renewal LLC

Address: 4040 Wilson Boulevard, Suite 1000, Arlington VA 22203

Telephone No.: 212-464-5401

List all restrictions, covenants, easements, agreements or other items affecting the use of the property.
N/A-given this is a change of tenancy application.

Describe the current use of the property.
Please see attached addendum as Exhibit A.

6. TAX COLLECTOR'S CERTIFICAITON

YES NO - Attached is a copy of a Certification from the Tax collector that all taxes due on the subject property have been paid. See Exhibit C attached.

7. SUPPORTING DOCUMENTS.

List all Maps, Reports and other materials accompanying the application (attach additional pages as required for complete listing). The documentation must be received by the Board at least ten (10) days prior to the meeting at which the application is to be considered.

Description of Item: Floor Plan prepared by Architrilogy, P.C. last revised June 19, 2024 (1 sheet)
Site Plan prepared by L2A Land Design, LLC last revised December 9, 2010 (3 sheets)

8. APPLICANT'S CONSULTANTS and REPRESENTATIVES

APPLICANT'S ATTORNEY

NAME	Andrew S. Kohut, Esq., Wells, Jaworski & Liebman, LLP
ADDRESS	12 Route 17 North, Suite 230
CITY, STATE ZIP	Paramus, New Jersey 07652
PHONE	201-490-6408
FAX	201-587-8845

APPLICANT'S ENGINEER

NAME	N/A
ADDRESS	
CITY, STATE ZIP	
PHONE	
FAX	

APPLICANT'S TRAFFIC CONSULTANT

NAME	N/A
ADDRESS	
CITY, STATE ZIP	
PHONE	
FAX	

APPLICANT'S PLANNING CONSULTANT

NAME	N/A
ADDRESS	
CITY, STATE ZIP	
PHONE	
FAX	

9. INFORMATION REGARDNG OTHER APPROVALS

Other Agency	Jurisdiction		Date Application Submitted
	Yes	No	
Wood-Ridge Sewerage Authority		X	
Bergen County Planning Board		X	
Bergen County Health Dept.		X	
BC Soil Conservation District		X	
NJ Dept. of Environmental Protection ("NJDEP)		X	
NJDEP Sewer Extension Permit		X	
NJDEP Stream Encroachment Permit		X	
NJDEP Wetlands Permit		X	
NJ Dept. of Transportation		X	
Other:			

10. NOTICES TO THE PUBLIC Respond to each of the following and attach a copy of the required notice, proof of mailing or proof of publication:

Yes **No**	Are you required to serve notice of public hearing on owners w/in 200 feet of the subject property?
Yes **No**	Are you required to serve notice of public hearing on the Clerk of an adjoining municipality?
Yes **No**	Are you required to serve notice of public hearing on the BC Planning Board?
Yes **No**	Are you required to serve notice of public hearing on any other person entity or governmental agency? Specify:
Yes **No**	Are you required to publish a notice in Wood-Ridge's official newspaper?

11. CERTIFICATIONS

APPLICANT

I certify that the statements made and the materials submitted in support of this application for development are true, I further certify that I am the individual applicant or that I am an Officer of the Corporate applicant and that I am authorized to sign the application for the Corporation or that I am a general partner of the partnership applicant.

I understand that an escrow deposit is required by the Borough of Wood-Ridge to cover the cost of professional services including engineering, planning, legal and other expenses associated with the review of submitted materials and the publication of the decision by the Planning Board. Sums not utilized in the review process shall be returned. I will make the escrow deposit within 15 days of notification of the proper amount. If additional sums are deemed necessary, I understand that I will be notified of the required additional amount and shall add that sum to the escrow account within fifteen (15) days. I understand that this application will be deemed incomplete unless the initial escrow deposit is made.

Date:_____ _____

Signature of Applicant

Sworn to and subscribed before me this

_____day of _____

_____

Notary Public

OWNER

I certify that I am the Owner of the property which is the subject of this application, and that I have authorized the applicant to make this application and that I agree to be bound by the application, the representations made and the decision in the same manner as if I were the applicant.

_____

Signature of Owner

Sworn to and subscribed before me this

26 day of NOVEMBER

_____

Notary Public

KATHERINE MILDRED VALDOVINOS
NOTARY PUBLIC
REG. #8023549
COMMONWEALTH OF VIRGINIA
MY COMMISSION EXPIRES JANUARY 31, 2026

11. CERTIFICATIONS

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Date: 11/26/24

Signature of Applicant

Andrew S. Kohut, Esq.
Attorney for Applicant

Sworn to and subscribed before me this

26th day of November 2024

Notary Public Katie V. Stroh

KATIE V. STROH
Notary Public, State of New Jersey
No. 50133584
Commission Expires August 10, 2025

OWNER

I certify that I am the Owner of the property which is the subject of this application, and that I have authorized the applicant to make this application and that I agree to be bound by the application, the representations made and the decision in the same manner as if I were the applicant.

Signature of Owner

Sworn to and subscribed before me this

_____ day of _____

Notary Public

SUBDIVISION APPLICATION DETAILS

Describe in detail the exact nature of the applications and the changes to be made at the premises, including the proposed use of the premises: (attached pages as needed)
N/A

Number of lots to be created	
Number of proposed dwelling units, including remainder lot, if applicable	
Have any proposed new lots been reviewed with the Tax Assessor to determine appropriate lot and block numbers?	Yes No
Are any off-tract improvements required or proposed?	Yes No
Any Request for Waiver from subdivision Design standard(s)	Yes No
Does the application require any variance?	Yes No
Attached is the completed application checklist required by ordinance	Yes No

For each design waiver required, state (attach additional sheets if needed):

Nature of waiver requested	Code Section affected	Facts supporting grant of waiver

For each variance required, state (attach additional sheets if needed):

Variance type (cl or c2)	Nature of variance requested	Zoning Code Section affected	Facts supporting grant of variance

SITE PLAN APPLICATION DETAILS

Describe in detail the exact nature of the application and the changes to be made at the premises, including the proposed use of the premises: (attach pages as needed)
N/A

Area to be disturbed (square feet)		
Total number of proposed dwelling units		
Are there any off-tract improvements required or proposed	Yes	No
Any Request for Waiver from Site Plan Design Standard(s)	Yes	No
Does the application require any variances:	Yes	No
Attached is the completed application checklist required by ordinance	Yes	No

For each design waiver required, state (attach additional sheets if needed):

Nature of waiver requested	Code Section affected	Facts supporting grant of waiver.

For each variance required, state (attach additional sheets if needed): if this is a use variance, state the proposed use and the reasons supporting grant of the requested use variance including ay special reasons.

Variance type (cl or c2)	Nature of variance requested	Zoning code section affected	Facts supporting grant of variance.

CONDITIONAL USE APPROVAL APPLCATION DETAILS

Describe in detail the exact nature of the application and the changes to be made at the premises, including the proposed use of the premises: (attach pages as needed)
N/A

List each condition affecting this application by section of Wood-Ridge Zoning Ordinance and describe how this application meets each condition.

Section No.	Description	How application complies

Does the application comply with all conditions set forth in the Wood-Ridge ordinance?	Yes	No
Did the Applicant complete the Site Plan Application Detail Sheet	Yes	No

APPLICATION WHICH CONTEMPLATES BUILDING OR STRUCTURE NOT ABUTTING A STREET – DETAILS

Does the application contemplate erection of a building or structure on a lot which does not abut a street giving access to the proposed building or structure? Yes No

If the answer to the foregoing is in the Affirmative:

Set forth the nature of the building or structure to be erected.
N/A

State the practical difficulty, unnecessary hardship or other circumstances which impede the placement of the proposed building or structure or a lot which abuts a street.

State all provisions proposed by the Applicant that will result in adequate access to the property for anticipated uses for firefighting equipment, ambulances and other emergency vehicles.

EXHIBIT A

APPLICATION ADDENDUM

The proposed tenant space is part of the Avalon at Wesmont Station. The subject tenant space is ±6,800 SF and proposed to be a franchise location for Phenix Salon Suites. Phenix Salon Suites provides individual, smaller suites for hairstylists, nail technicians and other salon service providers. The individual salon service providers lease the individual suite on a month-to-month basis. The salon service provider will have exclusive use of the leased suite. Each suite occupant makes their own hours of operation. Phenix Salon Suites are located throughout New Jersey, with local sites being Paramus, Little Ferry and Edgewater. Additional testimony will be provided by the Applicant pertaining to the proposed use and parking impacts.