

DEVELOPMENT APPLICATION
TOWN OF HACKETTSTOWN

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1. GENERAL INFORMATION

A. Applicant: Name New Jersey Detox Center, LLC ("NJDC") c/o Calli Law, LLC
Street Address 170 Kinnelon Rd, Suite 6, Kinnelon, NJ 07405
Municipality Kinnelon
Telephone 973-291-8102

B. Applicant Status:

Individual(s) ☐ Partnership ☐ Corporation ☐
Other ☒ Specify LLC

C. If Applicant is a Partnership or Corporation, attach a list of the names of persons having a 10% interest or more in said partnership or Corporation.

Check here if list is attached. ☒

D. Applicant relationship to property: Owner ☐ Lessee ☐
Under Contract ☒ Other ☐ Specify _____

E. Property Owner (if other than Applicant):

Name National Kitchen & Bath Association
Street Address 687 Willow Grove St.
Municipality Hackettstown
Telephone _____

F. Engineer/Land Surveyor: N/A

Name _____

Street Address _____

Municipality _____

Telephone _____

G. Attorney: Name Lawrence Calli, Esq. of Calli Law, LLC

Street Address 170 Kinnelon Rd, Suite 6, Kinnelon, NJ 07405

Municipality Kinnelon

Telephone 973-291-8102

2. TYPE OF APPLICATION - check where appropriate

_____ Minor Site Plan

VARIANCES

_____ Minor Subdivision

_____ Use

_____ Preliminary Major Site Plan

_____ Bulk

_____ Preliminary Major Subdivision

_____ Final Major Site Plan

(appeal from ☒ Interpretation
Administrative Officer)

_____ Final Major Subdivision

_____ Conditional Use

(REFER TO SECTION 200 OF
THE LAND USE ORDINANCE)

3. PROPERTY DATA

A. STREET ADDRESS 687 Willow Grove St.

B. BLOCK NUMBER 45 LOT NUMBER 3

C. The location of the property is approximately +/- 300' feet from
the intersection of Bilby Road and Helm's Mill Road

- D. Existing Use office
- E. Proposed Use medical detox facility
- F. Zone District HF Zone
- G. Acreage of Entire Tract to be Subdivided N/A
- H. Proposed Number of Lots N/A
- I. Is the property located on a County of Warren Roadway?
Yes ☐ No ☒
- J. Is the property located within 200' of a municipal boundary?
Yes ☐ No ☒
- K. Was this property subject to a prior development application?
Yes ☐ No ☒
- L. Is the property subject to any existing or proposed deed restrictions, easements, rights of way, private roads, or other dedications?
Yes ☐ No ☒

If so, attach all relevant information.

Check here if such information is attached. ☐

4. DEVELOPMENT PROPOSAL - Describe the nature of the application being sought, including on-site improvements

Applicant is seeking an interpretation pursuant to NJSA 40:55D-70b for the proposed
medical detox facility. Pursuant to your Code, health facilities are principally permitted in the
subject zone (HF Zone).

5. SUBMISSIONS - List all maps, plats, sketches and other exhibits accompanying this application:

<u>Description</u>	<u>Date Prepared</u>	<u>Prepared By</u>
N/A - application is for an interpretation.		

6. VARIANCES

Describe any proposed variances requested, detail and/or location, proposed block and lot and the specific section(s) of the Zoning Ordinance of the Town of Hackettstown from which relief is sought and the basis for said relief:

N/A - application is for an interpretation.

7. VERIFICATION AND AUTHORIZATION

I hereby certify that the statements and information contained herein and attached hereto are true and correct.

Lawrence A. Calli, Esq.

Applicant

3.14.22

Date

Lawrence Calli, Esq. of Calli Law, LLC on behalf of the Applicant

I hereby authorize the Applicant referenced herein to submit the subject application and to proceed for approval of same.

3/14/2022

Property Owner(s)

Date

OFFICIAL USE ONLY

8. APPLICATION HISTORY

A. Date Filed: _____

B. Date Complete: _____

C. Fee Paid: _____ Date Paid: _____

E. Notice of Hearing: Date of Publication _____

Date of Mailing _____

Affidavit Received _____

9. DISPOSITION OF APPLICATION

A. Application Denied

B. Application Withdrawn

C. Application Granted

DATE OF DISPOSITION: _____