

RECEIVED

AUG 28 2025

MORRIS TOWNSHIP
PLANNING DEPARTMENT

**TOWNSHIP OF MORRIS
PLANNING BOARD APPLICATION**
P.O. BOX 7603, 50 WOODLAND AVENUE, CONVENT STATION, NJ 07961-7603
PHONE # 973-326-7215 FAX #973-605-8363

The Technical Committee (TCC) meets the first and third Thursday of each month. The Planning Board meets the first and third Monday of each month. An application must be received (2) weeks prior to a TCC meeting for scheduling. Once the TCC has deemed the application complete and ready for consideration by the Board, a public hearing will be scheduled through the Board secretary.

File **original** and **fifteen copies** of application form with **required application and escrow fees. All applications** (except final major subdivision), shall be accompanied by **sixteen copies of Plat Plan** showing complete subdivision/ site plan, adjacent properties, key map and all other requirements in accordance with the land development (chapter 57) and zoning (chapter 95) ordinances of the Township of Morris. The **Planning Board** meets the **first and third Monday** of every month. **Filing is required three weeks prior** to the meeting.

CHECK TYPE (S) OF APPLICATION (check all that apply):

- | | |
|--|--|
| <input type="checkbox"/> MINOR SUBDIVISION | <input type="checkbox"/> CONCEPT REVIEW (TCC) |
| <input type="checkbox"/> MAJOR SUBDIVISION / PRELIMINARY | <input type="checkbox"/> "C" VARIANCE (s) _____ (#) |
| <input type="checkbox"/> MAJOR SUBDIVISION / FINAL | <input type="checkbox"/> EXCEPTIONS (aka Waiver) (s) _____ (#) |
| <input checked="" type="checkbox"/> SITE PLAN/ AMENDED SITE PLAN | <input type="checkbox"/> "D" (USE) VARIANCE |
| <input type="checkbox"/> CONDITIONAL USE | <input type="checkbox"/> OTHER (Please Specify) |
| <input type="checkbox"/> SITE PLAN WAIVER | |

1. APPLICANT (S) INFORMATION:

NAME Nielsen Ford of Morristown
PHONE# 908-741-4903 FAX none EMAIL rvrablik@nielsenautos.com
ADDRESS 170 Ridgedale Ave Morristown, NJ 07960

Please check one: OWNER or Purchaser under contract

* If not owner, attach separate sheet giving owners consent to file application*

IF APPLICANT IS NOT THE OWNER, PLEASE PROVIDE THE FOLLOWING INFORMATION:

OWNER'S NAME Evergreen Cemetery Association PHONE# 973-214-8290
ADDRESS 1 Evergreen Place, Morristown, NJ 07960

HAS THE OWNER OF THE PROPERTY IN QUESTION SIGNED THEIR CONSENT ON THE PLANS BEING SUBMITTED?

YES NO IF NO, A NOTARIZED AFFIDAVIT OF OWNER'S CONSENT **MUST BE ATTACHED.**

2. PROPERTY/TRACT INFORMATION:

BLOCK(S) 10201 LOT(S) 5, 9, 11, 12 NAME OF PROPERTY/TRACT (IIFANY) _____
STREET ADDRESS 170 Ridgedale Ave
ZONING DESIGNATION 1 - 21 AREA OF PROPERTY/TRACT (acreage or square feet) 11.23 Acres
PORTION OF LOT BEING UTILIZED (percentage) 100

3a. VARIANCES REQUESTED NO (YES or NO) 3b. WAIVERS REQUESTED YES (YES or NO)

IF VARIANCES AND/OR WAIVERS ARE REQUESTED, PLEASE STATE DETAILS (including specific ordinance section (s) from which relief is being sought) WAIVERS FROM STRICT COMPLIANCE WITH

SITE PLAN DESIGN STANDARDS

4. DEVELOPMENT PLANS - BRIEF EXPLANATION: FOR EXISTING AUTO DEALERSHIPS: RECONSTRUCT PAVEMENT AREAS, PAVE GRAVEL AREA, NEW LINE STRIPING, IMPROVE DRAINAGE, ADD EV CHARGING STATIONS, ADA RAMP AND PARKING, UPDATE SITE LIGHTING, NEW CURBS,

Major or Minor Subdivision, Provide the following: NUMBER OF PROPOSED LOTS _____
NUMBER OF PROPOSED UNITS: MARKET _____ MODERATE _____ LOW _____ TOTAL _____
ATTACHING ADDITIONAL SHEETS, IF NECESSARY, TO THE APPLICATION? YES NO

5. OTHER (Please Explain) _____

6. PERSONS OR FIRM PREPARING PLANS: DYKSTRA ASSOCIATES PC
ADDRESS 11 LAWRENCE RD NEWTON NJ 07860 TELEPHONE NO. 973-579-2177
FAX NO. 973-579-7777 EMAIL JASON@EDYKSTRA.COM

7. ATTORNEY NAME BRIAN MASON
ADDRESS 175 Route 10 E, SUITE 201, EASDT HANOVER, NJ 07801 07936 TELEPHONE NO. 973-366-9300
FAX NO. 973-366-9301 EMAIL BWM@MASONTHOMPSON.COM

8. OTHER PROFESSIONALS (IF ANY) WORKING ON APPLICATION
NAME _____
ADDRESS _____ TELEPHONE NO. _____
FAX NO. _____ EMAIL _____

NAME _____
ADDRESS _____ TELEPHONE NO. _____
FAX NO. _____ EMAIL _____


SIGNATURE OF APPLICANT, ATTORNEY, AND/OR AGENT FOR APPLICANT 7/21/2025
DATE

BRIAN W. MASON, ESQ. ATTORNEY FOR APPLICANT
PRINTED NAME RELATIONSHIP TO APPLICANT