

**TOWNSHIP OF MORRIS
SITE PLAN
CHECKLIST**



Site Name(s) Site Improvements to Existing
Auto Dealership, Guaranteed Services
Property in Question (Block, Lot) Block 10201,
Lots 5, 9, 11, 12

	YES	NO	REMARKS
1. Preparation			
A. Professional Engineer	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
B. Land Surveyor	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
C. Architect	<input type="checkbox"/>	<input checked="" type="checkbox"/>	NA
D. Planner	<input type="checkbox"/>	<input checked="" type="checkbox"/>	NA
E. Scale 1" = 50'	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
2. Required Information			
A. Dates	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
1. Date of Preparation	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
2. Revision Dates	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
B. Structures			
1. Layout of Proposed Buildings	<input type="checkbox"/>	<input checked="" type="checkbox"/>	NA
2. Elevation Plan	<input type="checkbox"/>	<input checked="" type="checkbox"/>	NA
C. Key Map			
1. Surrounding Areas	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
2. Existing Surrounding Streets	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
D. Title of Development			
1. North Arrow	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
2. Scale	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
3. Block and Lot Numbers	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
4. Name and Address of Owner	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
5. Name, Address, License Number & Seal of Preparer of Plat	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
E. Signs (Existing signs not proposed to change)			
1. Location	<input type="checkbox"/>	<input checked="" type="checkbox"/>	NA
2. Dimensions	<input type="checkbox"/>	<input checked="" type="checkbox"/>	NA
3. Details	<input type="checkbox"/>	<input checked="" type="checkbox"/>	NA
F. Lot			
1. Line Dimensions, in feet and decimals	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
2. Bearings, to nearest 10 seconds	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
3. Error of Closure, 1:10,000	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
G. Zoning			
1. Show Zoning of Site	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
2. Zoning of Adjacent Parcels	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
3. Zoning within 200 feet	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
H. Property			
1. Building Setback Lines (as per zoning)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
2. Easements (existing or proposed)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
3. Right-of-Way	<input checked="" type="checkbox"/>	<input type="checkbox"/>	

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I. Deed Restrictions, if any	<input type="checkbox"/>	<input checked="" type="checkbox"/>	NA
J. Existing Streets Abutting Property	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
1. Distances	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
K. Existing Structures			
1. Buildings	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
2. Walls	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
3. Fences	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
4. Culverts	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
5. Bridges	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
6. Roadways	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
7. Spot Elevations of All of the Above	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
8. Structure to be Removed Shall be Indicated as Such	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
L. Storm Drainage			
1. Location	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
2. Pipe size	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
3. Grades	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
4. Direction of Flow	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
M. Contours			
1. Existing --- show as dashed lines	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
a. Slopes less than 10 %, 2 feet intervals	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
b. Slopes greater than 10 %, 5 feet intervals	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
2. Proposed – Shown as Solid Lines	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
N. Steep Slopes Analysis			
1. Map (57-160(4))	<input type="checkbox"/>	<input checked="" type="checkbox"/>	NA
O. Existing Natural Features			
1. Rock Outcrops	<input type="checkbox"/>	<input checked="" type="checkbox"/>	NA
2. High Points	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
3. Water Courses	<input type="checkbox"/>	<input checked="" type="checkbox"/>	NA
4. Depressions	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
5. Ponds, Marshes, Swamps	<input type="checkbox"/>	<input checked="" type="checkbox"/>	NA
6. Wooded Areas	<input type="checkbox"/>	<input checked="" type="checkbox"/>	NA
7. Flood Elevations, if available from FIRM	<input type="checkbox"/>	<input checked="" type="checkbox"/>	NA
P. Survey	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
1. Prepared by License N.J. Land Surveyor	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Q. Public – Rights-of –Way			
1. Proposed Easements	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
2. Streets	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
a. Profile, with utilities, type, size, etc.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	NA
b. Cross Sections	<input type="checkbox"/>	<input checked="" type="checkbox"/>	NA
R. Land			
1. Use of Land and Building	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
2. Proposed Grades at Building	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
3. Building Floor Space	<input checked="" type="checkbox"/>	<input type="checkbox"/>	

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4. Est. Number of:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
a. Employees Existing	<input type="checkbox"/>	<input checked="" type="checkbox"/>	existing
b. Housing Units None	<input type="checkbox"/>	<input checked="" type="checkbox"/>	none
S. Traffic			
1. Ingress	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
2. Egress	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
3. Driveway Size and Location	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
4. Acceleration and/or Deceleration Lanes (if required)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	NA
5. Public Improvements	<input type="checkbox"/>	<input checked="" type="checkbox"/>	NA
a. Curbing	<input type="checkbox"/>	<input checked="" type="checkbox"/>	NA
b. Sidewalk	<input type="checkbox"/>	<input checked="" type="checkbox"/>	NA
6. Parking	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
a. Parking Stalls with Dimensions	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
b. Access Aisles	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
T. Off Street Parking			
1. Bays	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
2. Barriers	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
3. Aisles	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
4. Loading Areas	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
U. Water and Sewer Location			
1. Water Mains, Valves, Hydrants	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
2. Sewer Mains, Manholes, Connections	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
V. Lighting			
1. Intensity, in foot candles	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
2. Location	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
3. Power & Time of Illumination	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
4. Direction of Illumination	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
5. Type and Standard to be Employed	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
W. Planting Plan			
1. Size and Type to be Employed	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
2. Natural Vegetation to Remain	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
3. Screening & Buffer Zones to be Employed (if required)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	NA
X. Storm Drainage System			
1. Existing Drainage within 500 feet.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
2. Areas of:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
a. Paving	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
b. Grass	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
c. Wooded Areas	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
d. Other Contributing to Drainage	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Y. Other Information and Data as Required by Planning Board	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
3. Flood Plain Required Information			
A. Contours	<input type="checkbox"/>	<input checked="" type="checkbox"/>	NA
1. Existing	<input type="checkbox"/>	<input checked="" type="checkbox"/>	NA
2. Proposed	<input type="checkbox"/>	<input checked="" type="checkbox"/>	NA
3. Sloped less than 2% intervals of 1 feet.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	NA

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B. Elevations	<input type="checkbox"/>	<input checked="" type="checkbox"/>	NA
1. Building Corners	<input type="checkbox"/>	<input checked="" type="checkbox"/>	NA
C. Structure			
1. Elevation of Lowest Point	<input type="checkbox"/>	<input checked="" type="checkbox"/>	NA
D. Subsurface Conditions (if required)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	NA
E. Flood proofing of Structures	<input type="checkbox"/>	<input checked="" type="checkbox"/>	NA
1. Elevation of Floodproofing	<input type="checkbox"/>	<input checked="" type="checkbox"/>	NA
F. Floodproofing Certification	<input type="checkbox"/>	<input checked="" type="checkbox"/>	NA
1. Prof. Engineer	<input type="checkbox"/>	<input checked="" type="checkbox"/>	NA
2. Reg. Architect	<input type="checkbox"/>	<input checked="" type="checkbox"/>	NA
G. Base Flood Elevation Data:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	NA
1. FIRM- 100 year storm	<input type="checkbox"/>	<input checked="" type="checkbox"/>	NA

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LEGENDS TO BE INDICATED (and fully executed prior to submission where indicated)

A. To be signed before submission:

I consent to the filing of this site plan with the Planning Board of the Township of Morris.

SEE OWNER'S CONSENT ON APPLICATION
(Owner) (Date)

B. To be completed before submission: EVERGREEN CEMETERY ASSOCIATION

Site Plan of NIELSEN AUTO DEALER
Lot 5, 9, 11, 12 Block 10201 Zone SELECT I-21
Date 7-29-25 Scale 1" = 40'
Applicant NIELSEN FORD OF MORRISTOWN, INC
Address 170 RIDGEDALE AVE
MORRISTOWN, NJ 07960

C. To be signed before submission:

I hereby certify that I have prepared this site plan and that all the dimensions and information are correct.

[Signature]
(Signature)
OWEN DYKSTRA
(Printed Name)
N.J. P.E. LIC # 39920
(Title and License No.)

D. To be signed before issuance of a building permit:

Approved by the Planning Board of the Township of Morris

(Date) (Chairman)

E. To be signed before Planning Board approval is given:

I have reviewed this site plan and certify that it meets all codes and ordinances under my jurisdiction.

(Date) (Township Engineer)

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F. To be signed before issuance of a building permit:

I hereby certify that all required improvements have been installed or that a performance guarantee has been posted in accordance with the code of the Township of Morris.

(Township Engineer)

(Construction Official)

G. To be signed before issuance of certificate of occupancy:

I hereby certify that all of the required improvements of this site plan have been installed in compliance with all applicable codes and ordinances.

(Date)

(Township Engineer)

(Date)

(Construction Official)

H. Temporary certificate of occupancy issued:

(Date)

I. Certificate of occupancy issued:

(Date)