

RESOLUTION
of the
BOROUGH OF NEW PROVIDENCE
Resolution No. 2014-130

Council Meeting Date: 03-31-2014

Date Adopted: 03-31-2014

TITLE: RESOLUTION AUTHORIZING THE APPLICATION FOR A TREATMENT WORKS APPROVAL PERMIT FOR REDWOOD-ERC NEW PROVIDENCE, LLC

Councilperson Galluccio submitted the following resolution, which was duly seconded by Councilperson Madden.

WHEREAS, Bohlers Engineering., has made an application known as “Redwood-ERC New Providence, LLC” to the Board of Adjustment for Treatment Works Approval (TWA) of the property known as Block 320, Lot 17 and in connection with such approval, an application must be filed with the NJDEP for a Treatment Works Approval Permit for sewer extension; and

WHEREAS, such application requires the endorsement by the Borough which is a routine procedure.

NOW, THEREFORE BE IT RESOLVED by the Borough Council of the Borough of New Providence, County of Union and State of New Jersey that the Borough is authorized to endorse the Treatment Works Approval Application for “Redwood-ERC New Providence, LLC”.

APPROVED, this 31st day of March, 2014.

RECORD OF VOTE

	AYE	NAY	ABSENT	NOT VOTING
GALLUCCIO	X			
GENNARO			X	
KAPNER	X			
MADDEN	X			
MUÑOZ	X			
ROBINSON	X			
HERN			TO BREAK COUNCIL TIE VOTE	

I hereby certify that the above resolution was adopted at a meeting of the Borough Council held on the 31st day of March, 2014.

Wendi B. Barry, Borough Clerk



BOHLER ENGINEERING

35 Technology Drive
Warren, NJ 07059
PHONE 908.668.8300
FAX 908.754.4401

February 12, 2014

Via Federal Express

Maser Consulting, PA
200 Valley Road, Suite 400
Mount Arlington, New Jersey 07856

Attn: Patrick Jamieson

**RE: Redwood-ERC New Providence, LLC
Proposed Continuing Care Retirement Community
Block 320; Lot 17
Borough of New Providence
Union County, New Jersey
BENJ File No. 100690.01**

Dear Mr. Jamieson:

Pursuant to our telephone conversation on January 27th, enclosed please find the following documents constituting our offices formal submission for TWA review:

- One (1) original TWA-1 Application Form signed and sealed;
- One (1) original Engineer's Report Form WQM-006 signed and sealed;
- One (1) completed Consent Form WQM-003;
- One (1) Sanitary Sewer Opinion of Probable Cost for Redwood-ERC New Providence, LLC, dated 01/29/14, prepared by Brian McMorrow, PE of Bohler Engineering.
- One (1) copy of the appropriate USGS quadrangle map with the project site clearly delineated;
- One (1) set of the "PRELIMINARY & FINAL MAJOR SITE PLAN FOR REDWOOD-ERC NEW PROVIDENCE, LLC, PROPOSED CONTINUING CARE RETIREMENT COMMUNITY", Sheets 1 – 22 of 22, dated 01/19/12, last revised 02/12/14 (Revision #11), signed and sealed by Brian McMorrow, PE of Bohler Engineering.
- One (1) set of Sanitary Sewer Specifications for Redwood-ERC New Providence, LLC, dated February, 2014, signed and sealed by Brian McMorrow, PE of Bohler Engineering.

We request that you please review and endorse the enclosed Consent Form WQM-003 at your earliest convenience. Should you have any questions or require additional information, please contact us at your convenience.

BOHLER ENGINEERING NJ, LLC

Christopher Mondoro

Michael R. Costello, PE

CM/wa JA2010UJ100690.01\Letters-OUT\Maser (Jamieson)-2-11-14.doc
Enclosures:

cc via email:

Mark Hunter – Redwood-ERC New Providence, LLC
Paul S. Niehoff, PE, PP, CME – Maser Consulting, P.A.
Andrew R. Hipolit, PE – Maser Consulting, P.A.
Katsia Lord, RA, LEED AP BD + C – Lantz-Boggio Architects, P.C.
Brian McMorrow, PE – Bohler Engineering

OTHER OFFICE LOCATIONS:

- | | | | | | |
|------------------------------------|------------------------------|----------------------------------|-------------------------------------|---------------------------------------|------------------------------------|
| • Southborough, MA
508.480.9900 | • Albany, NY
518.438.9900 | • Ronkonkoma, NY
631.738.1200 | • Center Valley, PA
610.709.9971 | • Chalfont, PA
215.996.9100 | • Philadelphia, PA
267.402.3400 |
| • Towson, MD
410.821.7900 | • Bowie, MD
301.809.4500 | • Sterling, VA
703.709.9500 | • Warrenton, VA
540.349.4500 | • Fort Lauderdale, FL
954.202.7000 | • Tampa, FL
813.379.4100 |

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**STATE OF NEW JERSEY
DEPARTMENT OF ENVIRONMENTAL PROTECTION
DIVISION OF WATER QUALITY**

TWA - 1

Reset form

Treatment Works Approval Permit Application

Refer to Instructions on Page 4 and Provide All Applicable Information. Please Print or Type.

1. APPLICANT/OWNER *

Name Redwood - ERC New Providence, LLC Telephone (410) 402-2057
 Permanent Legal Address 701 Maiden Choice Lane
 City or Town Baltimore State MD Zip Code 21228 E-mail rick.slosson@erickson.com

** Applicant/Owner should be the eventual owner of the proposed Treatment Works.*

2. LOCATION OF ACTIVITY

Name of Facility/Site Proposed Continuing Care Retirement Community
 Street Address/Location 535 Mountain Avenue
 Lot No. 17 Block No. 320
 City or Town Borough of New Providence State NJ Zip Code 07974
 Municipality Borough of New Providence County Union

3. NEW JERSEY LICENSED PROFESSIONAL ENGINEER

Name Brian McMorrow, P.E. N.J. License No. 32473
 Name of Firm, if employee Bohler Engineering
 Mailing Address 35 Technology Drive
 City or Town Warren State NJ Zip Code 07059
 Telephone (908) 668-8300 Fax (908) 754-4401 E-Mail bmcorrow@bohlereng.com

4. ESTIMATED CONSTRUCTION COST AND APPLICATION FEE

A. Cost of treatment works proposed in this application \$ 49,229.60
(Attach a breakdown of the cost of all items related to the construction of the proposed treatment works).

B. Application Fee \$ 866.44
(In accordance with N.J.A.C. 7:1C-1.5 et seq., made payable to Treasurer, State of NJ, Environmental Services Fund).

5. OTHER REQUIRED PERMITS

If any of the the following applications have been submitted for this project, provide the applicable information.

Permit Type	Application Status		Application Date (or Application No.)
	Pending	Approved*	
● Treatment Works Approval	<input checked="" type="checkbox"/>	<input type="checkbox"/>	_____
● Exemption From Sewer Ban	<input type="checkbox"/>	<input type="checkbox"/>	_____
● Water Quality Management Plan Amendment	<input type="checkbox"/>	<input type="checkbox"/>	_____
● CAFRA	<input type="checkbox"/>	<input type="checkbox"/>	_____
● Stream Encroachment	<input type="checkbox"/>	<input type="checkbox"/>	_____
● Freshwater Wetlands	<input type="checkbox"/>	<input type="checkbox"/>	_____
● Tidal or Coastal Wetlands	<input type="checkbox"/>	<input type="checkbox"/>	_____
● Waterfront Development	<input type="checkbox"/>	<input type="checkbox"/>	_____
● NJPDES Permits	<input type="checkbox"/>	<input type="checkbox"/>	_____
● Pinelands Certificate	<input type="checkbox"/>	<input type="checkbox"/>	_____
● Delaware & Raritan Canal Commission	<input type="checkbox"/>	<input type="checkbox"/>	_____
● Hackensack/Meadowlands Commission	<input type="checkbox"/>	<input type="checkbox"/>	_____
● Other Related Approvals	<input type="checkbox"/>	<input type="checkbox"/>	_____

(* If any of the above applications were approved, please provide a copy of the approval with this application).

6. PROJECT DESCRIPTION (Brief Description of Proposed Treatment Works and Intended Use).

Proposed 1,291 LF of 8" PVC to service the 275 independent living units and 85 assisted living units. The proposed sanitary sewer system connects to an existing sanitary sewer manhole located within South Street.

7. APPLICANT'S AGENT (Optional)

I, Mark Hunter
 (Applicant/Owner's Name)
 authorize to act as my agent/representative in all matters pertaining to my application the following person:
 Name Brian McMorrow, P.E. Position Senior Project Manager, Bohler Engineering
 Address 35 Technology Drive City Warren
 State NJ Zip Code 07059 Telephone (908) 668-8300
Brian McMorrow 02-12-14 Mark Hunter 1-29-14
 Signature of Agent Date Signature of Applicant/Owner Date

8. PROPERTY OWNER'S CERTIFICATION

I hereby certify that Redwood - ERC New Providence, LLC
 (Property Owner's Name)
 owns the property identified in this application. As owner, I grant permission for the activity to be permitted under this application and authorize the Department of Environmental Protection to conduct on-site inspections, if necessary. If the construction activity will take place in an easement, I certify that with this application, I presently have or will obtain permission of the property owner(s) prior to initiation of construction of this proposed treatment works.
Mark Hunter 1-29-14
 Signature of Owner Date
 Print or Type: Name and Position Mark Hunter, Director of Development

9. STATEMENT OF PREPARER OF PLANS, SPECIFICATIONS AND ENGINEER'S REPORT AND/OR ABSTRACT

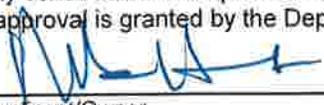
I hereby certify that the engineering plans, specifications, and engineer's report and/or abstract applicable to this project comply with the current rules and regulations of the Department of Environmental Protection with the exceptions as noted.
Brian McMorrow 02-12-14
 Signature of Engineer Date
 Print or Type: Name and Position Brian McMorrow, P.E., Senior Project Manager

PROFESSIONAL ENGINEER'S
EMBOSSSED SEAL



10. PROPER CONSTRUCTION AND OPERATION CLAUSE

I, the Applicant/Owner, Mark Hunter agree that the treatment works will be properly constructed and operated in accordance with the engineering plans, specifications and conditions under which approval is granted by the Department of Environmental Protection.

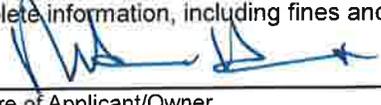

Signature of Applicant/Owner

1.29.14
Date

Print or Type: Name and Position Mark Hunter, Director of Development

11. CERTIFICATION BY APPLICANT/OWNER

I certify, under penalty of law, that the information provided in this application and the attachments is true, accurate, and complete. I am aware that there are significant civil and criminal penalties for submitting false, inaccurate, or incomplete information, including fines and/or imprisonment.


Signature of Applicant/Owner

1.29.14
Date

Print or Type: Name and Position Mark Hunter, Director of Development

INSTRUCTIONS FOR COMPLETING FORM TWA - 1

This form should accompany all Treatment Works Approval permit applications.

1. **General Information** - (items #1 through #4, #6) Complete the requested applicant and project information.
2. **Other Required Permits** (item # 5) - Please list all permits issued for the subject project (in addition to the permits being applied for at this time).
3. **Signatures** (items #7 through #11) - All signatures must comply with N.J.A.C. 7:14A-4.9 and N.J.A.C. 7:14A-22.8. Where indicated under items #1, #10 and #11, the applicant/owner should be the eventual owner of the proposed treatment works. Item #8 shall be completed by the owner of the property.

Should you need assistance in completing the application, please call the appropriate phone number listed below:

◆ **Bureau of Construction & Connection Permits**
(609) 984-4429
Municipal Treatment Works, Industrial
Treatment Works, Sewer Extension, Sewer Ban
Exemption, Subsurface Disposal Systems

◆ **Bureau of Nonpoint Pollution Control**
(609) 633-7021
Alternate Design Septic Systems
(design flow less than 2,000 GPD)

**STATE OF NEW JERSEY
DEPARTMENT OF ENVIRONMENTAL PROTECTION
Division of Water Quality**

Reset Form

ENGINEER'S REPORT for DOMESTIC TREATMENT WORKS APPROVAL APPLICATIONS

INSTRUCTIONS

- Complete all applicable sections and certifications.
- Justifications for any exceptions from the regulations at N.J.A.C. 7:14A - 23 et seq. must be submitted. (Additional sheets may be attached if necessary.)
- All supplemental information required to be submitted along with this engineer's report must be signed, sealed, and dated by a professional engineer, licensed to practice in the State of New Jersey.
- **For Treatment Works other than collection and/or conveyance, please attach a separate Engineer's Report in accordance with N.J.A.C. 7:14A - 23.5.**

GENERAL INFORMATION

Applicant: Redwood-ERC New Providence, LLC Municipality: Borough of New Providence

Project Name: Redwood-ERC County: Union

Name of Receiving Sewage Treatment Plant: New Providence WWTP

NJPDES Permit Number: NJ0021636

Effluent Receiving Waters: Passaic River

Scope of Project:

Proposed 1,291 LF of 8" PVC to service the 275 Independent Living units and 85 Assisted Living units. The proposed sanitary sewer system connects to an existing

sanitary sewer manhole located within South Street.

Contributory Flow: *For assistance in completing this chart, refer to N.J.A.C. 7:14A - 23.3.*

Establishment Type	Number of Measurement Units		Gallons per Day per Unit		Projected Flow (G.P.D.)
	see attachment	X		=	
		X		=	
		X		=	
		X		=	

Combined Projected Flow: 0.0532 M.G.D.
 Existing Contributory Flow (if any): 0 M.G.D.
TOTAL FLOW: 0.0532 **M.G.D.**

1. WASTEWATER CONVEYANCE SYSTEMS

(A) GRAVITY SEWER SYSTEMS

Diameter (inches)	Total Length (feet)	Material Type	"n" Value	Max. MH Spacing (feet)	Min. Slope (%)	Max. Velocity (ft/sec)	Max. Capacity (M.G.D.)
8	1,291	PVC	0.011	285	.5	9.86	0.36

1.	What is the minimum cover (as measured from the top of the pipe to the grade elevation) provided along the entire sewer line?	3.5 ft.		
2.	What is the infiltration and/or exfiltration limit for testing purposes (gallons per inch of pipe per mile per day)?	50		
		YES	NO	N/A
3.	Are sewers within 100 feet of a public water supply well or a below-grade reservoir?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4.	Are sewers located at least 10 feet horizontally from potable water lines and/or at least 18 inches below potable water lines and in separate trenches, including crossings?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5.	Are sewers crossing streams located within 10 feet of a stream embankment encased in concrete?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
6.	Is a drop pipe provided for sewers entering manholes above the manhole invert wherever the difference in elevation is two feet or more?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
7.	Are all manholes located more than 100 feet from a public water supply well or a below-grade reservoir?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8.	Are watertight covers used where street elevations are less than 10 feet above the North American Vertical Datum of 1988 and/or where the top of a manhole may be flooded by street runoff or high water?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
9.	Are the sanitary sewers designed to carry at least twice the estimated average projected flow when flowing half full?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10.	Have adequate provisions been made for the ventilation of manholes?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11.	If siphons are part of this project, are they in conformance with N.J.A.C. 7:14A - 23.7?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
12.	Are the immediate downstream sewer lines constructed?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

(B) PUMPING SYSTEM: Submit a Pump Station Design Report, which should include, at a minimum, the basis for the following: (a) pump selection; (b) sizing of force main and velocity calculations;(c) total dynamic head; (d) pump station performance curve and (e) wet well detention time.

Average daily flow: _____ GPD	Surface area of wet well: _____ ft ²
Peaking factor: _____	Wet Well Detention Time : _____ minutes
Peak design flow: _____ GPD	TDH of pump: _____ ft
Number of pumps: _____	
Design capacity of pump station (with the largest pump out of service): _____	_____ GPM

1. WASTEWATER CONVEYANCE SYSTEMS

(B) PUMPING SYSTEM (continued)

FORCE MAINS

Diameter (inches)	Length (feet)	Material Type	Velocity (ft/sec)

1.	What is the minimum cover (as measured from the top of the pipe to the grade elevation) provided along the entire force main?			
2.	Specify the method of screening at the pumps.			
3.	Where is the ultimate location of the alarm for high water conditions, power failures, and mechanical breakdowns?			
4.	Specify the type of back-up power source provided.			
		YES	NO	N/A
5.	Is adequate light and ventilation provided at the pump station?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6.	Are air and/or vacuum release valves provided on the high points of the force main?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7.	Are adequate freshwater wash-down facilities provided?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8.	If a domestic water service connection will be utilized for wash-down purposes, is it protected by a backflow prevention device?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9.	Are shut-off valves on suction and discharge piping and check valves on discharge lines provided?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10.	Is the base of the pump station wet well sloped toward the pump suction?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11.	Does the alarm system provide for competent assistance on a 24 hour basis?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12.	Is the pump station adequately protected from flooding?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13.	Is the dry well provided with a sump pump?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

I am a professional engineer licensed by the New Jersey Board of Professional Engineers and Land Surveyors to practice in New Jersey. I certify that the proposed treatment works, as designed, meets the requirements of N.J.A.C. 7:14A - 23 et seq., other than the exceptions as noted.

I hereby certify that the information provided in this engineer's report and attachments hereto, is true, accurate, and complete. Exceptions attached [YES , NO]?

Signature of Engineer:

Brian McMorrow, PE

Professional Engineer's
Embossed Seal

Name and Date:
(Print or Type)

Bohler Engineering NJ, LLC

Firm Name:



2. DOMESTIC WASTEWATER TREATMENT AND/OR RESIDUAL FACILITIES

Is the following information submitted with this engineer's report?	YES	NO
1. A complete description of the selected wastewater treatment system.	<input type="checkbox"/>	<input type="checkbox"/>
2. For the modification of an existing system which has not previously been granted a treatment works approval (TWA), the capacities of the existing units and a brief description of the operation of each, and a statement concerning which units are existing and which are proposed at the time of the application. If there exists a previously issued TWA approval for the subject facility, submit the date of issuance and the TWA number.	<input type="checkbox"/>	<input type="checkbox"/>
3. Hydraulic profiles of the flow of wastewater through the system.	<input type="checkbox"/>	<input type="checkbox"/>
4. A unit by unit mass balance for all discharge parameters.	<input type="checkbox"/>	<input type="checkbox"/>
5. The ultimate disposal location of all effluent.	<input type="checkbox"/>	<input type="checkbox"/>
6. The basis and computations for average and peak flow requirements.	<input type="checkbox"/>	<input type="checkbox"/>
7. The expected composition of the influent and effluent from the treatment system including the average, maximum and minimum values of the pollutant parameters specified in the facility's NJPDES permit/DAC.	<input type="checkbox"/>	<input type="checkbox"/>
8. An evaluation of the quantity and quality of any and all residuals generated and projected to be generated, including a hydraulic profile and unit by unit mass balance for the flow of residuals through the system.	<input type="checkbox"/>	<input type="checkbox"/>
9. Documentation of adequate storage and handling facilities for residuals.	<input type="checkbox"/>	<input type="checkbox"/>
10. Provisions for the ultimate management of residuals.	<input type="checkbox"/>	<input type="checkbox"/>
11. Details of flow monitoring and control, alarm systems, auxiliary power, storage facilities for treatment chemicals and wastes, and plans for bypassing units during construction or maintenance.	<input type="checkbox"/>	<input type="checkbox"/>
12. The basis and computations for the projected wastewater flow.	<input type="checkbox"/>	<input type="checkbox"/>
13. A fully executed Licensed Operator Grading Form.	<input type="checkbox"/>	<input type="checkbox"/>

I am a professional engineer licensed by the New Jersey Board of Professional Engineers and Land Surveyors to practice in New Jersey. I certify that the proposed treatment works, as designed, are adequate to meet all applicable final NJPDES permit limitations contained in the current NJPDES Discharge Permit No. _____, In addition, I certify that the proposed treatment works, as designed, meets the requirements of N.J.A.C. 7:14A - 23 et seq., other than the exceptions as noted.

I hereby certify that the information provided in this engineer's report and attachments hereto is true, accurate, and complete. Exceptions attached [YES , NO]?

Signature of Engineer*

N/A

Professional Engineer's
Embossed Seal

Name and Date:
(Print or Type)

Brian McMorrow, PE

Firm Name:

Bohler Engineering NJ, LLC

* This certification may not be completed until the effective date of the associated final NJPDES Discharge Permit.

J100690 01
 Erickson Living
 595 Mountain Avenue
 New Providence, NJ
PROJECTED SANITARY SEWER FLOWS
 Prepared by: CAM

Proposed:

From "Preliminary Major Site Plan Floor Plan - Lower Level - 3 - Overall Floor Plan" by Lantz-Boggio Architects, P.C., Dated 5/21/12

Requirements:

From NJAC 7:14A-23.3 Projected Flow Criteria

<u>Type of Establishment</u>	<u>Measurement Unit</u>	<u>Number of Units</u>	<u>Type of Establishment</u>	<u>Measurement Unit</u>	<u>Gallons Per Day</u>	<u>Proposed Flow Calculations:</u>
Independent Living			Independent Living			
1 Bedroom Unit (age restricted)	Per Dwelling	94	1 Bedroom Unit (age restricted)	Per Dwelling	110	=94 Dwellings * 110 GPD / Dwelling
2 Bedroom Unit (age restricted)	Per Dwelling	181	2 Bedroom Unit (age restricted)	Per Dwelling	170	=181 Dwelling * 170 GPD / Dwelling
Amenity Spaces - Independent Living	Sq. Ft.	27,760	Stores and Shopping Centers (gross area)	Sq. Ft.	0.1	= 27,760 SF * 0.1 GPD / SF
Pool	Per Occupant	80	Pool	Per Occupant	15	= 80 Occupants * 15 GPD
Health Care			Health Care			
Skilled Nursing Facility	Bed	40	Skilled Nursing Facility	Bed	75	=40 Beds * 75 GPD / Bed
Memory Care	Bed	28	Assisted Living Facility	Bed	100	=28 Beds * 100 GPD / Bed
Assisted Living	Bed	17	Assisted Living Facility	Bed	100	=17 Beds * 100 GPD / Bed
Amenity Spaces - Health Care	Sq. Ft.	5,912	Stores and Shopping Centers (gross area)	Sq. Ft.	0.1	= 5,912 SF * 0.1 GPD / SF
			Total			53,177.20 GPD

STATE OF NEW JERSEY
DEPARTMENT OF ENVIRONMENTAL PROTECTION
Division of Water Quality

Reset Form

STATEMENTS OF CONSENT

A supplement to the TWA-1 or NJPDES-1 Forms

General Information

Applicant/Owner/Operator

Location of Work Site

Name of Project/Facility

Type of permit application (TWA, NJPDES/SIU)

NJPDES Permit Number (if applicable)

A-1 Consent By Governing Body**

(Consent by the municipality in which the project is located.)

As an authorized representative of the governing body, I hereby certify that the

(Name of Municipality or Municipal Authority)

consents to the submission of the above listed application to the Department of Environmental Protection for approval. I further certify that the project as proposed conforms with the requirements of all municipal ordinances.

Signed* _____ Date

Type Name and Position

* Cite authorization to sign for the governing body

Resolution# Dated

(Submit the resolution with the application. If no such resolution granting authority to sign exists, the Governing Body's full resolution, consenting to the project, must be submitted with the application.)

** Note

For most Treatment Works Approval (TWA) applications, this section may be omitted if a sewerage entity (for example, sewerage authority, utilities authority, municipal utilities authority, joint meeting, etc.) has responsibility for regulating the construction and operation of wastewater treatment and conveyance facilities within the municipality. In such cases, the governing body consent requirement may be satisfied by completing Section A-2. Applicants for TWAs for industrial/commercial facilities discharging pursuant to NJPDES/DSW or DGW permits must complete section A-1.

A-2 Consent by Sewerage Authority**

As an authorized representative of this agency, I hereby certify that the

(Name of Agency)

consents to the submission of the above listed application to the Department of Environmental Protection for approval. I further certify that the project as proposed conforms with the requirements of this agency.

Signed* _____ Date_

Type Name and Position_

* Cite authorization to sign for the agency

Resolution#_ Dated_

(Submit the resolution with the application. If no such resolution granting authority to sign exists, the Governing Body's full resolution, consenting to the project, must be submitted with the application.)

** Note

For TWA applications, this section must be completed when a sewerage entity (for example, sewerage authority, utilities authority, municipal utilities authority, joint meeting, etc.) has responsibility for regulating the construction and operation of wastewater treatment and conveyance facilities within the municipality.

A-3 Consent by Owner of Wastewater Treatment Facility**

(For NJPDES/SIU applications only)

As an authorized representative of this agency, I hereby certify that the

(Name of Agency)

consents to the submission of the above listed application to the Department of Environmental Protection for approval. I further certify that the project as proposed conforms with the requirements of this agency and the agency agrees to accept wastewater from the project for treatment.

Signed* _____ Date_

Type Name and Position_

* Cite authorization to sign for the agency

Resolution#_ Dated_

(Submit the resolution with the application. If no such resolution granting authority to sign exists, the Agency's full resolution, consenting to the project, must be submitted with the application.)

** Note

For NJPDES/SIU applications, this section must be completed when the owner of the receiving wastewater treatment plant is different than the entity listed under A-2.

B. Certification by Wastewater Conveyance System Owner**

By agreeing to accept wastewater from the project, I (we) hereby certify that to the best of my (our) knowledge the wastewater conveyance system, into which the project proposed under this application will connect, has adequate capacity in accordance with N.J.A.C. 7:14A-1.2 ("Adequate conveyance capacity"). Furthermore, I (we) am (are) not aware of inadequate conveyance capacity conditions in any portion of the downstream facilities necessary to convey the wastewater from this project to the treatment plant.

Name of Municipality or Authority _____

Signed* _____ Date _____

Type Name and Position _____

* Cite authorization to sign for the governing body

Resolution# _____ Dated _____

(Submit the resolution with the application. If no such resolution granting authority to sign exists, the governing body's full resolution, consenting to the project, must be submitted with the application.)

** Note

1. For TWA applications, this section must be completed by the owner/operator of the wastewater conveyance system into which the project named herein will directly connect.

2. For NJPDES/SIU applications, this section must be completed when the owner/operator wastewater conveyance system into which the project named herein will directly connect is different that the entity listed under A-3.

C. Certification by Wastewater Treatment Facility Owner**

(For TWA applications that include a sewer connection/extension.)

I (we) hereby certify that the committed flow*** to the _____
(Name of Wastewater Treatment Plant)

does not exceed the presently permitted design capacity and with the additional flow proposed by this application, the permitted design capacity is not anticipated to be exceeded. I (we) further certify that the treatment plant is currently complying with its **conventional and non-conventional** NJPDES permit requirements (see N.J.A.C. 7:14A-22.17(b)-(d), percent removal and toxicity requirements excluded from this certification) as determined by **a rolling average of the three most recent monthly discharge monitoring reports that were required to be submitted to the Department as of this date**, and based upon my (our) assessment of all information pertinent to this permit request, is anticipated to continue to do so with the additional flow from this project.

Accepted for Treatment by _____
(Name of Treating Authority)

Signed* _____ Date _____

Type Name and Position _____

Name of project and/or location _____

* Cite authorization to sign for the governing body

Resolution# _____ Dated _____

(Submit the resolution with the application. If no such resolution granting authority to sign exists, the governing body's full resolution, consenting to the project, must be submitted with the application.)

** For TWA applications, this section must be completed by the owner of the wastewater treatment facility receiving the wastewater identified in this application.

*** For the purposes of this certification, committed flow means the sum of the 1) actual metered flow, 2) flow from DEP approved TWA applications (not yet operational), and 3) flow from locally approved projects that do not require DEP approval.

Additional Information (For TWA Applications)

1. Approvals, permits, service contracts, or other reservations of flow capacity issued or agreed to by any participating municipality or sewerage agency do not constitute the required approval of the DEP.
2. For computation of actual flow at the receiving wastewater treatment plant, the average flow processed by the facility for the three (3) month period immediately preceding the submission of the application shall be used. Pursuant to the NJPDES regulations (N.J.A.C. 7:14A), no application shall be submitted to the DEP if the wastewater treatment facility is not meeting its discharge permit requirements.

Lack of Consent*

1. The affected sewerage authority or municipality must consent to the application or submit comments to the DEP within 60 days of the applicant's request for consent. Prior to the expiration of the 60-day period to respond to a request for a written statement of consent, the municipality or sewerage authority may request a 30-day time extension.
2. Any document issued by a sewerage authority or municipality which is a tentative, preliminary, or conditional approval shall not be considered a statement of consent.
3. When the affected sewerage authority or municipality does not consent to a project, it shall state all reasons for rejection or disapproval in a resolution and send a certified copy of the resolution to the DEP.
4. When the affected sewerage authority or municipality expressly denies a request for a written statement of consent for a project, the permit application may be determined by the DEP to be incomplete for processing; or in the alternative, the DEP may review the reasons for denial. Any such reasons shall be considered by the DEP in determining whether to issue a draft permit in accordance with N.J.A.C. 7:14A-15.6, or a Treatment Works Approval or sewer connection approval in accordance with N.J.A.C. 7:14A-22.
5. When the affected sewerage authority or municipality does not issue a written statement of consent in accordance with (1) above, or a denial in accordance with (3) above, the DEP, upon receipt of proof that the applicant has delivered to the affected agency a written request for a statement of consent, shall review the reasons therefore, if known on the basis of reasonably reliable information. Any such reasons shall be considered by the DEP in determining whether to issue a draft permit in accordance with N.J.A.C. 7:14A-15.6, or a Treatment Works Approval in accordance with N.J.A.C. 7:14A-22. The DEP, may in its discretion, deem the application to be incomplete pending the expiration of the time period set forth in (1) above.

* This section has been excerpted from the NJPDES regulations for guidance purposes only. Please refer to N.J.A.C. 7:14A-22.8(a)3 for the complete requirements concerning statements of consent.

Notice: False statements, representations, or certifications, in any application, record, or document are subject to fines and penalties as set forth in the Water Pollution Control Act (N.J.S.A. 58:10A-10F 2 and 3.

CONTRACT OFFICE
 400 WEST 10TH STREET
 PHOENIX, AZ 85003
 (602) 258-8800
 WWW.BOHLENERGINEERING.COM

PROJECT MANAGER
 400 WEST 10TH STREET
 PHOENIX, AZ 85003
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OFFICE
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REV	DATE	COMMENT	DRAWN BY

FOR EXHIBIT PURPOSES ONLY

PROJECT NO. 110000001
 DRAWN BY: JAV
 CHECKED BY: BB
 DATE: 12/17/2013
 SCALE: AS NOTED
 CAD FILE: 00001113

PRELIMINARY AND FINAL MAJOR SITE PLAN
 FOR
REDWOOD-ERC NEW PROVIDENCE, LLC

BLOCK 320, LOT 17
 TAX MAP SHEET #32
 535 MOUNTAIN AVENUE
 BOROUGH OF NEW PROVIDENCE
 UNION COUNTY, NEW JERSEY

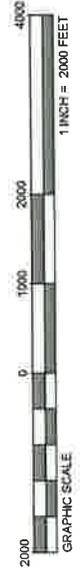
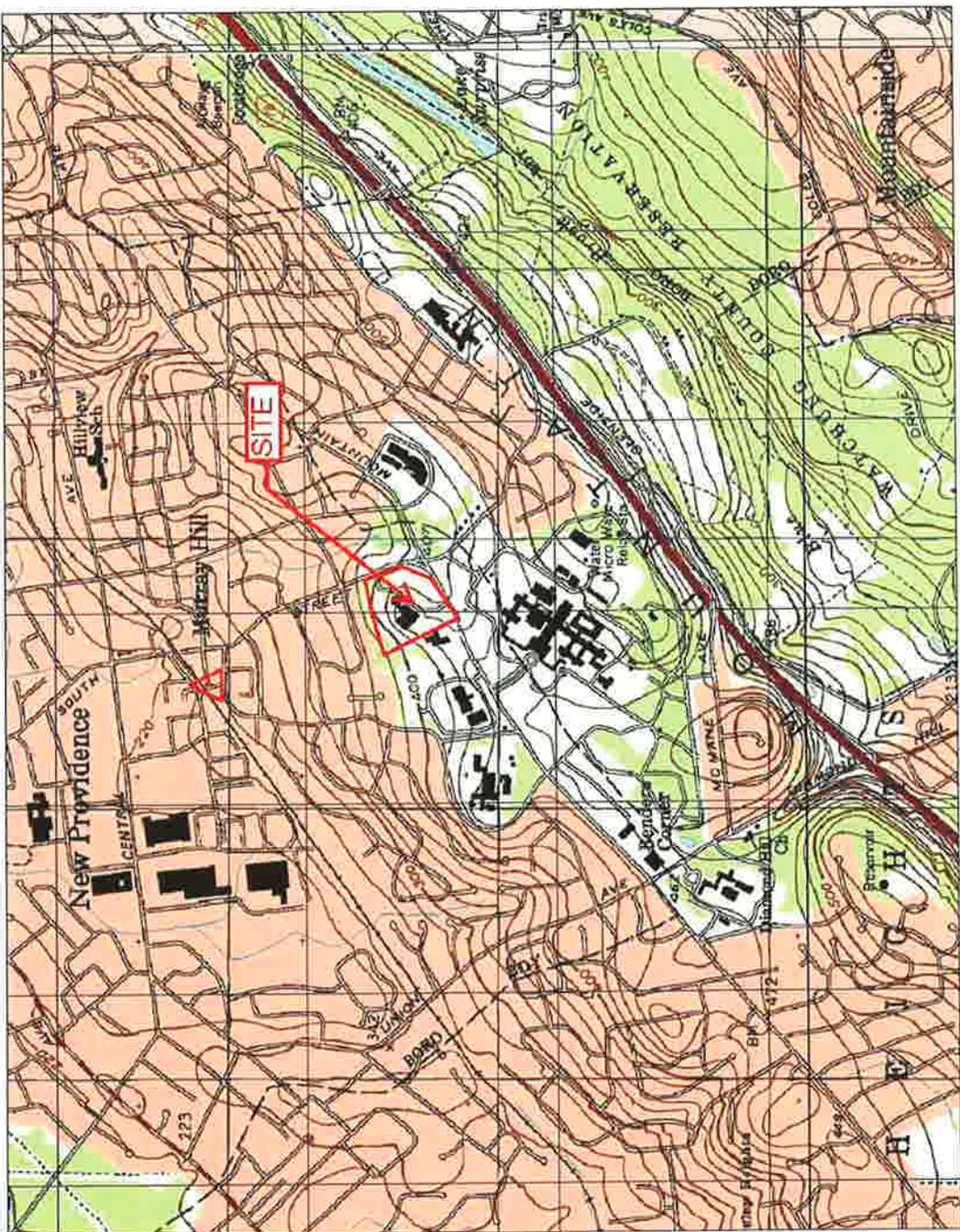
B. McMORROW

PROFESSIONAL ENGINEER
 NEW JERSEY LICENSE NO. 3473
 PENNSYLVANIA LICENSE NO. 3843
 OHIO LICENSE NO. 56595
 FLORIDA LICENSE NO. 45865

SHEET TITLE
USGS QUADRANGLE MAP: CHATAM

SHEET NUMBER
1
 OF 1

REVISION 0 - 12/17/2013





BOHLER ENGINEERING

**SANITARY SEWER OPINION OF PROBABLE COST
FOR
REDWOOD-ERC NEW PROVIDENCE, LLC
Borough of New Providence, Union County, New Jersey
1/29/2014
BE #: J100690.01**

Prepared by:
BOHLER ENGINEERING
35 Technology Drive, Warren, NJ 07059

Prepared By: MRC
Checked By: CM

QUANTITY UNIT UNIT COST TOTAL COST

SANITARY

On Site:

8" PVC (SDR 35)	1291	LF	\$ 28.10	\$36,277.10
4' Diameter Manhole	6	EA	\$ 1,500.00	\$9,000.00
Cleanout	7	EA	\$ 275.00	\$1,925.00
Saddle connection	5	EA	\$ 245.00	\$1,225.00
Connection to existing manhole/main	1	EA	\$ 802.50	\$802.50

Subtotal	\$49,229.60
SUBTOTAL:	<u>\$49,229.60</u>
TOTAL:	<u>\$49,229.60</u>

NOTE:

- 1.) This preliminary opinion of probable construction cost has been prepared based upon review of plans entitled Preliminary & Final Major site plan as prepared by Bohler Engineering, NJ, LLC, dated 01/19/12. Last revised 01/30/14.
- 2.) The unit pricing included is appropriate and is based upon available pricing indices or this firms historical experience in the general geographical area as a result of same, it is only approximate. For utilization as a budget estimate, same must be updated by current market conditions and other constructability factors.
- 3.) This opinion of probable construction cost excludes costs that may be associated with the dewatering, unforeseen sub-surface conditions, environmental conditions, earth work, adverse weather conditions, material requirements, temporary utility installations, electrical transformer costs, water meter costs, etc. This estimate is not to be utilized for proforma or finance purposes.

