

ORDINANCE NO. 08-2020

**BOROUGH OF ROSELAND
COUNTY OF ESSEX, STATE OF NEW JERSEY**

AN ORDINANCE OF THE BOROUGH OF ROSELAND AMENDING CHAPTER XXX OF THE CODE OF THE BOROUGH OF ROSELAND, ENTITLED "ROSELAND BOROUGH LAND DEVELOPMENT ORDINANCE" BY AMENDING VARIOUS SECTIONS OF SAME TO CREATE THE R-12/AH-6 AFFORDABLE HOUSING DISTRICT

BE IT ORDAINED by the Borough Council of the Borough of Roseland, County of Essex and State of New Jersey as follows:

SECTION 1: PURPOSE

The purpose of this Ordinance is to amend the Borough of Roseland's Land Development Ordinance in accordance with the Settlement Agreement between the Borough and Fair Share Housing Center ("FSHC") entered into on November 7, 2019, the Settlement Agreement entered into between the Borough and JMF Properties entered into on November 13, 2019, and the Borough's Housing Element and Fair Share Plan, by adding a new section 30-404.11 to establish the requirements of a new zoning district referred to as R-12/AH-6 Affordable Housing Zone, which will result in the creation of an inclusionary development consisting of 108 for-sale market rate stacked townhome units and thirty (30) affordable age-restricted rental units.

SECTION 2: AMEND SECTION 30-202 DEFINITIONS.

Article II of Chapter XXX the Code of the Borough of Roseland is hereby amended to revise the definition for Age-Restricted Multi-Family Housing and add a new definition of Stacked Townhouse, as follows:

DWELLING UNITS, TYPE:

TOWNHOUSE, STACKED – shall mean a building consisting of more than two (2) attached single-family residences, each with separate outside access and separated by either vertical, horizontal or both vertical and horizontal construction.

AGE-RESTRICTED MULTI-FAMILY HOUSING

shall mean a building occupied as separate living quarters with a maximum of ~~sixteen (16)~~ thirty (30) dwelling units with separate cooking, sleeping and sanitary facilities. Each dwelling unit shall have its own entrance and at least one of the primary occupants shall be fifty-five (55) years of age or older pursuant to bylaws, rules, regulations and restrictions of record.

SECTION 3: NEW SECTION: §30-404.11.

Article IV of Chapter XXX the Code of the Borough of Roseland is hereby amended to add Section 30-404.11, as follows:

§30-404.11 R-12/AH-6 Affordable Housing Zone

- a. Permitted Principal Uses and Densities. Properties in the R-12/AH-6 District may be developed with inclusionary housing subject to the following requirements and limitations:
 1. In the R-12/AH-6 District, properties may be developed for townhouses and age-restricted multi-family apartments at a maximum development yield of 108 market-rate stacked townhouse units and a 30-unit age-restricted multifamily affordable housing building (22% set aside), for a total of 138 dwelling units. Not less than thirty (30) housing units shall be designated for occupancy by very low, low- and moderate income households. The units designated for very low, low- and moderate-income households shall be in the multifamily buildings. All affordable units shall comply with the Borough's Affordable Housing Ordinance, the Uniform Housing Affordability Controls ("UHAC"), applicable COAH affordable housing regulations including but not limited to phasing requirements, any applicable order of the Court, and other applicable laws.
- b. Permitted accessory uses.
 1. Parking areas and lots as required by Chapter XXX;
 2. Loading areas as required by Chapter XXX;
 3. Landscaping as permitted by Chapter XXX, except that the Planning Board may grant waivers from Section 30-403.9 and Section 30-516.3;
 4. Signage as permitted by Chapter XXX, except that, notwithstanding Sections 30-403.17.C.7 and 30-403.17.C.8, a temporary sales sign not to exceed 32 square feet in area shall be permitted until the date of issuance of the first certificate of occupancy for the inclusionary development, and except that, notwithstanding Section 30-403.17.F.2, a permanent entry sign not to exceed 32 square feet in area shall be permitted;
 5. Refuse and recycling enclosures as regulated by Chapter XXX;
 6. Satellite antennae as regulated by Chapter XXX and/or Federal law;
 7. Fences and walls as regulated by Chapter XXX, except that retaining walls may be higher than 6 feet, subject to review and approval by the Borough Engineer;
 8. Driveways and utilities as regulated by Chapter XXX;
 9. Private attached garages to be used by occupants of the inclusionary housing development in this zone;
 10. Trailers as regulated by Chapter XXX, except that, notwithstanding Section 30-403.12, temporary sales trailers shall be permitted until the date of issuance of the first certificate of occupancy for the inclusionary development, and

temporary construction trailers shall be permitted until the date of issuance of the final certificate of occupancy for the inclusionary development; and

11. Any other customarily incidental accessory use, as determined by the Planning Board.

c. Required Conditions. The following zoning standards shall apply to development in the R-12/AH-6 District:

1. Minimum lot area shall be 2 acres.
2. Minimum lot width shall be seventy-five (75) feet.
3. Maximum gross residential density for the R-12/AH-6 District shall be fourteen (14) dwelling units per acre and the maximum amount of total dwelling units shall not exceed 138 dwelling units.
4. Minimum front, rear and side yards from a lot boundary line for permitted principal and accessory uses shall be ten (10) feet.
5. Maximum impervious coverage is seventy-five (75%) percent.
6. Maximum height for principal structures shall be three-and-one-half (3-1/2) stories or fifty-five (55) feet.
7. Maximum Building Length: Each stacked townhome dwelling building shall not exceed two hundred twenty-five (225) feet in length.
8. The market-rate dwelling units may be located on a separate lot from the affordable dwelling units.

I. Parking requirements.

- (1) Although parking is governed by the Residential Site Improvement Standards, N.J.A.C. 5:21-1.1 et seq., the Borough of Roseland recognizes that, due to local conditions, an alternative parking standard of one (1) space per residential unit (for a total of 138 parking spaces) is appropriate for the inclusionary development on the property, in accordance with N.J.A.C. 5:21-4.1(c).

SECTION 4: INCONSISTENT ORDINANCES

All ordinances or parts of ordinances inconsistent with or in conflict with this ordinance are hereby repealed to the extent of such inconsistency.

SECTION 5: PARTIAL INVALIDITY

If any section, paragraph, clause or provision of this ordinance shall be adjudged invalid, such adjudication shall apply only to the section, paragraph, clause or provision so adjudged and the remainder shall be deemed valid and effective.

SECTION 6: COPIES OF ORDINANCE

At least three copies of said full Ordinance are on file in the Office of the Borough Clerk for public examination and acquisition. Copies are available for inspection or acquisition during regular weekday working hours.

SECTION 7: NOTICE

The Borough Clerk is hereby directed to give notice at least ten days prior to the hearing on the adoption of this Ordinance to the Essex County Planning Board, and to all others entitled thereto pursuant to the provisions of N.J.S. 40:55D-15. Upon adoption of this Ordinance, after public hearing thereon, the Borough Clerk is further directed to publish notice of passage thereof and file a copy of this Ordinance as finally adopted with the Essex County Planning Board as required by N.J.S.A. 40:55D-16 and with the Borough Tax Assessor.

SECTION 8: EFFECTIVE DATE

This ordinance shall take effect upon publication as provided by law.

DATE OF INTRODUCTION: March 17, 2020

Motion to Introduce by: Councilman Bardi

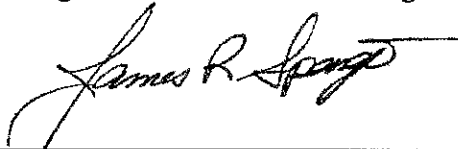
Motion Seconded by: Councilwoman Perrotti

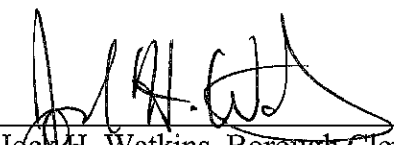
Introduction Approved: 6-0 Voice Vote

DATE OF ADOPTION: May 19, 2020

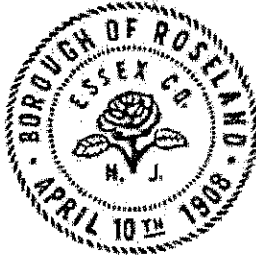
COUNCIL	MOTION	SECOND	AYE	NAY	ABSTAIN	RECUSE	ABSENT
Council President Bardi	X		X				
Councilwoman Fishman		X	X				
Councilman Freda			X				
Councilwoman Perrotti			X				
Councilwoman Tolli			X				
Councilman Trillo			X				
Mayor Spango (In case of tie)							
VOTE:			6	0			

I hereby certify that the above Ordinance was duly adopted by the Mayor and Council of the Borough of Roseland at a meeting of Borough Council held on the 19th day of May, 2020.


James R. Spango, Mayor


Jock H. Watkins, Borough Clerk

Date of Publication: May 28, 2020, The Progress



BOROUGH OF ROSELAND

ESSEX COUNTY, NEW JERSEY

140 EAGLE ROCK AVENUE, ROSELAND, NEW JERSEY 07068

(973) 226-8080

BOROUGH CLERK

Jock H. Watkins, RMC

CERTIFIED MAIL NO: 7018-1830-0002-1066-8883

April 30, 2020

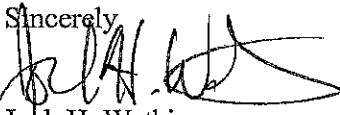
Mr. David Antonio, P.P., AICP
Essex County Planning Board
900 Bloomfield Avenue
Verona, NJ 07044

RE: Ordinance No. 08-2020
Ordinance No. 09-2020
Ordinance No. 10-2020
Amend and Supplement Borough Code
Chapter XXX, Land Development

Dear Mr. Antonio:

Pursuant to N.J.S.A. 40:55D-15, we sent you notice, with enclosed copies of the above referenced ordinance(s), advising that the subject ordinances were introduced and passed on first reading at an Official Meeting of the Governing Body of the Borough of Roseland on the 17th day of March, 2020. Due to the Covid-19 health emergency, the public hearings on these ordinances were tabled until the May 19th meeting of the Roseland Governing Body. This notice is to advise you that the above referenced ordinances, copies of which were previously sent, shall come up for final passage at an Official Meeting of the Governing Body to be held via Teleconference on Tuesday, the 19th day of May, 2020, at 7:30 PM. Public participation in the meeting can be accessed by computer at www.freeconferencecall.com/wall/boroughofroseland/ or by telephone at 760-548-9833 at which time any persons interested shall be given the opportunity to be heard concerning said Ordinances.

Sincerely,


Jock H. Watkins

Municipal Clerk

jwatkins@roselandnj.org

973-403-6029

Enclosure(s)

Via Certified mail to Municipal Clerks of:

Borough of Essex Fells
Township of East Hanover
Township of Livingston
Township of West Caldwell
Township of West Orange

Certified Mail No. 7018-1830-0002-1066-8890
Certified Mail No. 7018-1830-0002-1066-8906
Certified Mail No. 7018-1830-0002-1066-8913
Certified Mail No. 7018-1830-0002-1066-8920
Certified Mail No. 7018-1830-0002-1066-8937

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
Domestic Mail Only

For delivery information, visit our website at www.usps.com
VERONA, NJ 07044

OFFICIAL USE

Certified Mail Fee	\$3.55	0226
Extra Services & Fees (check box, add fee as appropriate)	\$2.85	10
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00	
<input type="checkbox"/> Return Receipt (electronic)	\$0.00	
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00	
<input type="checkbox"/> Adult Signature Required	\$0.00	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00	
Postage	\$0.55	
Total Postage and Fees	\$6.95	

Postmark Here

04/30/2020

Mr. David Antonio, P.P., AICP
 Essex County Planning Board
 900 Bloomfield Avenue
 Verona, NJ 07044

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
Domestic Mail Only

For delivery information, visit our website at www.usps.com
CALDWELL, NJ 07006

OFFICIAL USE

Certified Mail Fee	\$3.55	0226
Extra Services & Fees (check box, add fee as appropriate)	\$2.85	10
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00	
<input type="checkbox"/> Return Receipt (electronic)	\$0.00	
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00	
<input type="checkbox"/> Adult Signature Required	\$0.00	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00	
Postage	\$0.55	
Total Postage and Fees	\$6.95	

Postmark Here

04/30/2020

Ser Ms. Mary Donovan, Clerk
 Str Township of West Caldwell
 City 30 Clinton Road
 West Caldwell, NJ 07006

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
Domestic Mail Only

For delivery information, visit our website at www.usps.com
WEST ORANGE, NJ 07052

OFFICIAL USE

Certified Mail Fee	\$3.55	0226
Extra Services & Fees (check box, add fee as appropriate)	\$2.85	10
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00	
<input type="checkbox"/> Return Receipt (electronic)	\$0.00	
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00	
<input type="checkbox"/> Adult Signature Required	\$0.00	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00	
Postage	\$0.55	
Total Postage and Fees	\$6.95	

Postmark Here

04/30/2020

Ser Ms. Karen J. Carnevale, Clerk
 Str Township of West Orange
 City 66 Main Street, Room 101
 West Orange, NJ 07052

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
Domestic Mail Only

For delivery information, visit our website at www.usps.com
ESSEX FELLS, NJ 07021

OFFICIAL USE

Certified Mail Fee	\$3.55	02
Extra Services & Fees (check box, add fee as appropriate)	\$2.85	
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00	
<input type="checkbox"/> Return Receipt (electronic)	\$0.00	
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00	
<input type="checkbox"/> Adult Signature Required	\$0.00	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00	
Postage	\$0.55	
Total Postage and Fees	\$6.95	

Postmark Here

04/30/2020

Ser Ms. Francine T. Paserchia, Clerk
 Str Borough of Essex Fells
 City 255 Roseland Avenue
 Essex Fells, NJ 07021

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
Domestic Mail Only

For delivery information, visit our website at www.usps.com
EAST HANOVER, NJ 07936

OFFICIAL USE

Certified Mail Fee	\$3.55	0226
Extra Services & Fees (check box, add fee as appropriate)	\$2.85	10
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00	
<input type="checkbox"/> Return Receipt (electronic)	\$0.00	
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00	
<input type="checkbox"/> Adult Signature Required	\$0.00	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00	
Postage	\$0.55	
Total Postage and Fees	\$6.95	

Postmark Here

04/30/2020

Ser Ms. Paula A. Massaro, Clerk
 Str Township of East Hanover
 City 411 Ridgedale Avenue
 East Hanover, NJ 07936

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
Domestic Mail Only

For delivery information, visit our website at www.usps.com
LIVINGSTON, NJ 07039

OFFICIAL USE

Certified Mail Fee	\$3.55	0226
Extra Services & Fees (check box, add fee as appropriate)	\$2.85	10
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00	
<input type="checkbox"/> Return Receipt (electronic)	\$0.00	
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00	
<input type="checkbox"/> Adult Signature Required	\$0.00	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00	
Postage	\$0.55	
Total Postage and Fees	\$6.95	

Postmark Here

04/30/2020

Ser Mr. Glenn R. Turteltaub, Clerk
 Str Township of Livingston
 City 357 South Livingston Avenue
 Livingston, NJ 07039

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

Complete items 1, 2, and 3.

- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Mr. David Antonio, P.P., AICP
Essex County Planning Board
900 Bloomfield Avenue
Verona, NJ 07044

9590 9402 5002 9063 1737 21

2. Article Number (Transfer from service label)

7018 1830 0002 1066 8821

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

Agent

Addressee

3. Service Type

- ☐ Adult Signature
☐ Adult Signature Restricted Delivery
☐ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery
☐ Insured Mail
☐ Insured Mail Restricted Delivery (over \$500)
- ☐ Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☐ Return Receipt for Merchandise
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

Complete items 1, 2, and 3.

- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Ms. Mary Donovan, Clerk
Township of West Caldwell
30 Clinton Road
West Caldwell, NJ 07006

9590 9402 5002 9063 1739 05

2. Article Number (Transfer from service label)

7018 1830 0002 1066 8869

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

B. Received by (Printed Name)

Agent

Addressee

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type

- ☐ Adult Signature
☐ Adult Signature Restricted Delivery
☐ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery
☐ Insured Mail
☐ Insured Mail Restricted Delivery (over \$500)
- ☐ Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☐ Return Receipt for Merchandise
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

Complete items 1, 2, and 3.

- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Mr. Glenn R. Tuttle, Clerk
Township of Livingston
357 South Livingston Avenue
Livingston, NJ 07039

9590 9402 5002 9063 1739 12

2. Article Number (Transfer from service label)

7018 1830 0002 1066 8852

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

B. Received by (Printed Name)

Agent

Addressee

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type

- ☐ Adult Signature
☐ Adult Signature Restricted Delivery
☐ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery
☐ Insured Mail
☐ Insured Mail Restricted Delivery (over \$500)
- ☐ Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☐ Return Receipt for Merchandise
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

Domestic Return Rec

SENDER: COMPLETE THIS SECTION

Complete items 1, 2, and 3.

- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Ms. Karen J. Carnevale, Clerk
Township of West Orange
66 Main Street, Room 101
West Orange, NJ 07052

9590 9402 5002 9063 1738 99

2. Article Number (Transfer from service label)

7018 1830 0002 1066 8876

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

B. Received by (Printed Name)

Agent

Addressee

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type

- ☐ Adult Signature
☐ Adult Signature Restricted Delivery
☐ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery
☐ Insured Mail
☐ Insured Mail Restricted Delivery (over \$500)
- ☐ Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☐ Return Receipt for Merchandise
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

Domestic Return Rec

SENDER: COMPLETE THIS SECTION

13. Complete items

- ☒ Print your name and address on the reverse so that we can return the card to you.
- ☒ Attach this card to the back of the mailpiece, or if space permits, send to:

Ms. Francine T. Pasarchia, Clerk
Borough of Essex Fells
255 Roseland Avenue
Essex Fells, NJ 07021

9590 9402 5002 9063 1739 36

2. Article Number (Transfer from service label)

7018 1830 0002 1066 8848

PS Form 3811, July 2015 PSN 7530-02-000-9063

SENDER: COMPLETE THIS SECTION

- ☒ Complete items 1, 2, and 3.
- ☒ Print your name and address on the reverse so that we can return the card to you.
- ☒ Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Ms. Paula A. Massaro, Clerk
Township of East Hanover
411 Ridgedale Avenue
East Hanover, NJ 07936

9590 9402 5002 9063 1739 29

2. Article Number (Transfer from service label)

7018 1830 0002 1066 8845

PS Form 3811, July 2015 PSN 7530-02-000-9063

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent ☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes ☐ No
If YES, enter delivery address below:



3. Service Type

- | | |
|--|---|
| <input checked="" type="checkbox"/> Adult Signature | <input type="checkbox"/> Priority Mail Express® |
| <input type="checkbox"/> Adult Signature Restricted Delivery | <input type="checkbox"/> Registered Mail™ |
| <input type="checkbox"/> Certified Mail® | <input type="checkbox"/> Registered Mail Restricted Delivery |
| <input type="checkbox"/> Certified Mail Restricted Delivery | <input type="checkbox"/> Return Receipt for Merchandise |
| <input type="checkbox"/> Collect on Delivery | <input type="checkbox"/> Signature Confirmation™ |
| <input type="checkbox"/> Collect on Delivery Restricted Delivery | <input type="checkbox"/> Signature Confirmation Restricted Delivery |
| <input type="checkbox"/> Insured Mail | |
| <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500) | |

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

- A. Signature ☒ Agent ☐ Addressee
- B. Received by (Printed Name) ☒ EAST HANOVER ☐ Addressee
- C. Date of Delivery 2/21/10
- D. Is delivery address different from item 1? ☐ Yes ☐ No
If YES, enter delivery address below:

9590 9402 5002 9063 1739 29

3. Service Type

- | | |
|--|---|
| <input type="checkbox"/> Adult Signature | <input type="checkbox"/> Priority Mail Express® |
| <input type="checkbox"/> Adult Signature Restricted Delivery | <input type="checkbox"/> Registered Mail™ |
| <input type="checkbox"/> Certified Mail® | <input type="checkbox"/> Registered Mail Restricted Delivery |
| <input type="checkbox"/> Certified Mail Restricted Delivery | <input type="checkbox"/> Return Receipt for Merchandise |
| <input type="checkbox"/> Collect on Delivery | <input type="checkbox"/> Signature Confirmation™ |
| <input type="checkbox"/> Collect on Delivery Restricted Delivery | <input type="checkbox"/> Signature Confirmation Restricted Delivery |
| <input type="checkbox"/> Insured Mail | |
| <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500) | |

Domestic Return Receipt



BOROUGH OF ROSELAND

ESSEX COUNTY, NEW JERSEY

140 EAGLE ROCK AVENUE, ROSELAND, NEW JERSEY 07068

(973) 226-8080

BOROUGH CLERK

Jock H. Watkins, RMC

CERTIFIED MAIL NO: 7018-1830-0002-1066-8821

March 30, 2020

Mr. David Antonio, P.P., AICP
Essex County Planning Board
900 Bloomfield Avenue
Verona, NJ 07044

RE: Ordinance No. 08-2020
Ordinance No. 09-2020
Ordinance No. 10-2020
Amend and Supplement Borough Code
Chapter XXX, Land Development

Dear Mr. Antonio:

Pursuant to N.J.S.A. 40:55D-15, enclosed are copies of the above referenced ordinance(s) that were introduced by the Borough Council at a meeting held March 17, 2020. The Council will conduct a public hearing and consider final passage of the ordinance(s) during its regular meeting scheduled for April 21, 2020 at 7:30 PM via teleconference. We will provide the telephone access numbers necessary for the teleconference as soon as they become available.

Sincerely,

Jock H. Watkins
Municipal Clerk
jwatkins@roselandnj.org
973-403-6029

Enclosure(s)

Via Certified mail to Municipal Clerks of:

Borough of Essex Fells
Township of East Hanover
Township of Livingston
Township of West Caldwell
Township of West Orange

Certified Mail No. 7018-1830-0002-1066-8838
Certified Mail No. 7018-1830-0002-1066-8845
Certified Mail No. 7018-1830-0002-1066-8852
Certified Mail No. 7018-1830-0002-1066-8869
Certified Mail No. 7018-1830-0002-1066-8876

7018 1830 0002 1066 8863
7018 1830 0002 1066 8920
7018 1830 0002 1066 8937

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT *Jack*
Domestic Mail Only

For delivery information, visit our website at www.usps.com

OFFICIAL USE
VERONA, NJ 07044

Certified Mail Fee	\$3.55	0226
	\$2.85	10
Extra Services & Fees (check box, add fee as appropriate)		
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00	
<input type="checkbox"/> Return Receipt (electronic)	\$0.00	
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00	
<input type="checkbox"/> Adult Signature Required	\$0.00	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00	
Postage	\$0.55	
Total Postage and Fees	\$6.95	

Postmark Here

04/30/2020

Mr. David Antonio, P.P., AICP
Essex County Planning Board
900 Bloomfield Avenue
Verona, NJ 07044

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT *Jack*
Domestic Mail Only

For delivery information, visit our website at www.usps.com

OFFICIAL USE
CALDWELL, NJ 07006

Certified Mail Fee	\$3.55	0226
	\$2.85	10
Extra Services & Fees (check box, add fee as appropriate)		
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00	
<input type="checkbox"/> Return Receipt (electronic)	\$0.00	
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00	
<input type="checkbox"/> Adult Signature Required	\$0.00	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00	
Postage	\$0.55	
Total Postage and Fees	\$6.95	

Postmark Here

04/30/2020

Ms. Mary Donovan, Clerk
Township of West Caldwell
30 Clinton Road
West Caldwell, NJ 07006

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT *Jack*
Domestic Mail Only

For delivery information, visit our website at www.usps.com

OFFICIAL USE
WEST ORANGE, NJ 07052

Certified Mail Fee	\$3.55	0226
	\$2.85	10
Extra Services & Fees (check box, add fee as appropriate)		
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00	
<input type="checkbox"/> Return Receipt (electronic)	\$0.00	
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00	
<input type="checkbox"/> Adult Signature Required	\$0.00	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00	
Postage	\$0.55	
Total Postage and Fees	\$6.95	

Postmark Here

04/30/2020

Ms. Karen J. Carnevale, Clerk
Township of West Orange
66 Main Street, Room 101
West Orange, NJ 07052

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

7018 1830 0002 1066 8890
7018 1830 0002 1066 8900
7018 1830 0002 1066 8913

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT *Jack*
Domestic Mail Only

For delivery information, visit our website at www.usps.com

OFFICIAL USE
ESSEX FELLS, NJ 07021

Certified Mail Fee	\$3.55	02
	\$2.85	
Extra Services & Fees (check box, add fee as appropriate)		
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00	
<input type="checkbox"/> Return Receipt (electronic)	\$0.00	
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00	
<input type="checkbox"/> Adult Signature Required	\$0.00	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00	
Postage	\$0.55	
Total Postage and Fees	\$6.95	

Postmark Here

04/30/2020

Ms. Francine T. Paserchia, Clerk
Borough of Essex Fells
255 Roseland Avenue
Essex Fells, NJ 07021

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT *Jack*
Domestic Mail Only

For delivery information, visit our website at www.usps.com

OFFICIAL USE
EAST HANOVER, NJ 07936

Certified Mail Fee	\$3.55	0226
	\$2.85	10
Extra Services & Fees (check box, add fee as appropriate)		
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00	
<input type="checkbox"/> Return Receipt (electronic)	\$0.00	
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00	
<input type="checkbox"/> Adult Signature Required	\$0.00	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00	
Postage	\$0.55	
Total Postage and Fees	\$6.95	

Postmark Here

04/30/2020

Ms. Paula A. Massaro, Clerk
Township of East Hanover
411 Ridgedale Avenue
East Hanover, NJ 07936

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT *Jack*
Domestic Mail Only

For delivery information, visit our website at www.usps.com

OFFICIAL USE
LIVINGSTON, NJ 07039

Certified Mail Fee	\$3.55	0226
	\$2.85	10
Extra Services & Fees (check box, add fee as appropriate)		
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00	
<input type="checkbox"/> Return Receipt (electronic)	\$0.00	
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00	
<input type="checkbox"/> Adult Signature Required	\$0.00	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00	
Postage	\$0.55	
Total Postage and Fees	\$6.95	

Postmark Here

04/30/2020

Mr. Glenn R. Turteltaub, Clerk
Township of Livingston
357 South Livingston Avenue
Livingston, NJ 07039

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

1. Article Addressed to:
- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

Mr. David Antonio, P.P., AICP
Essex County Planning Board
900 Bloomfield Avenue
Verona, NJ 07044

9590 9402 5002 9063 1738 06

2. Article Number (Transfer from service label)

701B 1B30 0002 1066 8883

PS Form 3811, July 2015 PSN 7530-02-000-9053

SENDER: COMPLETE THIS SECTION

1. Article Addressed to:
- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

Ms. Francine T. Pascheria, Clerk
Borough of Essex Fells
255 Roseland Avenue
Essex Fells, NJ 07021

9590 9402 5002 9063 1738 13

2. Article Number (Transfer from service label)

701B 1B30 0002 1066 8890

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

- A. Signature ☒ Agent ☐ Addressee
- B. Received by (Printed Name) C. Date of Delivery
- D. Is delivery address different from item 1? ☐ Yes ☒ No
- If YES, enter delivery address below:

3. Service Type

- ☐ Adult Signature ☐ Priority Mail Express®
☐ Adult Signature Restricted Delivery ☐ Registered Mail™
☐ Certified Mail® ☐ Registered Mail Restricted Delivery
☐ Collect on Delivery ☐ Return Receipt for Merchandise
☐ Collect on Delivery Restricted Delivery ☐ Signature Confirmation™
☐ Insured Mail ☐ Signature Confirmation Restricted Delivery
☐ Insured Mail Restricted Delivery (over \$500)

COMPLETE THIS SECTION ON DELIVERY

- A. Signature ☐ Agent ☐ Addressee
- B. Received by (Printed Name) C. Date of Delivery
- D. Is delivery address different from item 1? ☐ Yes ☒ No
- If YES, enter delivery address below:

Ms. Francine T. Pascheria, Clerk
Borough of Essex Fells
255 Roseland Avenue
Essex Fells, NJ 07021

3. Service Type
- ☐ Adult Signature ☐ Priority Mail Express®
☐ Adult Signature Restricted Delivery ☐ Registered Mail™
☐ Certified Mail® ☐ Registered Mail Restricted Delivery
☐ Collect on Delivery ☐ Return Receipt for Merchandise
☐ Collect on Delivery Restricted Delivery ☐ Signature Confirmation™
☐ Insured Mail ☐ Signature Confirmation Restricted Delivery
☐ Insured Mail Restricted Delivery (over \$500)

PS Form 3811, July 2015 PSN 7530-02-000-9053

SENDER: COMPLETE THIS SECTION

1. Article Addressed to:
- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

Ms. Paula A. Massaro, Clerk
Township of East Hanover
411 Ridgedale Avenue
East Hanover, NJ 07936

9590 9402 5002 9063 1738 20

2. Article Number (Transfer from service label)

701B 1B30 0002 1066 8906

PS Form 3811, July 2015 PSN 7530-02-000-9053

SENDER: COMPLETE THIS SECTION

1. Article Addressed to:
- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

Mr. Glenn R. Turteltaub, Clerk
Township of Livingston
357 South Livingston Avenue
Livingston, NJ 07039

9590 9402 5002 9063 1738 37

2. Article Number (Transfer from service label)

701B 1B30 0002 1066 8913

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

- A. Signature ☒ Agent ☐ Addressee
- B. Received by (Printed Name) C. Date of Delivery
- D. Is delivery address different from item 1? ☐ Yes ☒ No
- If YES, enter delivery address below:

3. Service Type

- ☐ Adult Signature ☐ Priority Mail Express®
☐ Adult Signature Restricted Delivery ☐ Registered Mail™
☐ Certified Mail® ☐ Registered Mail Restricted Delivery
☐ Collect on Delivery ☐ Return Receipt for Merchandise
☐ Collect on Delivery Restricted Delivery ☐ Signature Confirmation™
☐ Insured Mail ☐ Signature Confirmation Restricted Delivery
☐ Insured Mail Restricted Delivery (over \$500)

COMPLETE THIS SECTION ON DELIVERY

- A. Signature ☐ Agent ☐ Addressee
- B. Received by (Printed Name) C. Date of Delivery
- D. Is delivery address different from item 1? ☐ Yes ☒ No
- If YES, enter delivery address below:

Mr. Glenn R. Turteltaub, Clerk
Township of Livingston
357 South Livingston Avenue
Livingston, NJ 07039

3. Service Type
- ☐ Adult Signature ☐ Priority Mail Express®
☐ Adult Signature Restricted Delivery ☐ Registered Mail™
☐ Certified Mail® ☐ Registered Mail Restricted Delivery
☐ Collect on Delivery ☐ Return Receipt for Merchandise
☐ Collect on Delivery Restricted Delivery ☐ Signature Confirmation™
☐ Insured Mail ☐ Signature Confirmation Restricted Delivery
☐ Insured Mail Restricted Delivery (over \$500)

PS Form 3811, July 2015 PSN 7530-02-000-9053

SENDER: COMPLETE THIS SECTION

1. Complete items 1, 2, and 3.
2. Print your name and address on the reverse so that we can return the card to you.
3. Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Ms. Karen J. Carnevale, Clerk
Township of West Orange
66 Main Street, Room 101
West Orange, NJ 07052



9590 9402 5002 9063 1738 51

2. Article Number (Transfer from service label)

7018 1830 0002 1066 8937

PS Form 3811, July 2015 PSN 7530-02-000-9053

SENDER: COMPLETE THIS SECTION

1. Complete items 1, 2, and 3.
2. Print your name and address on the reverse so that we can return the card to you.
3. Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Ms. Mary Donovan, Clerk
Township of West Caldwell
30 Clinton Road
West Caldwell, NJ 07006



9590 9402 5002 9063 1738 44

2. Article Number (Transfer from service label)

7018 1830 0002 1066 8937

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

- A. Signature ☒ Agent
B. Received by (Printed Name) ☐ Addressee
C. Date of Delivery
D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☐ Adult Signature
☐ Adult Signature Restricted Delivery
☐ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery
☐ Insured Mail
☐ Insured Mail Restricted Delivery (over \$500)

☐ Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☐ Return Receipt for Merchandise
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

- A. Signature ☒ Agent
B. Received by (Printed Name) ☐ Addressee
C. Date of Delivery
D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☐ Adult Signature
☐ Adult Signature Restricted Delivery
☐ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery
☐ Insured Mail
☐ Insured Mail Restricted Delivery (over \$500)

☐ Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☐ Return Receipt for Merchandise
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt