

S-6/19

Township of Lawrence
Mercer County NJ
Department of Community Development

Land Use Application Master Checklist

Name of Applicant: PHAT LE

Block No. 2310 Lot No(s) 27

- | | |
|---|--|
| <p>Required for all applications:</p> <p><input checked="" type="checkbox"/> General Information</p> <p><input checked="" type="checkbox"/> Certifications</p> <p><input checked="" type="checkbox"/> Taxpayer Identification number & certification</p> | <p>Complete form:</p> <p>Form G-1</p> <p>Form C-1</p> <p>IRS form W-9</p> |
|---|--|

- Type of approval sought (check all as appropriate):**
- | | |
|---|-----------|
| <input type="checkbox"/> Appeal from decision of Administrative Officer | Form A-1 |
| <input type="checkbox"/> Bulk Variance (parcel) | Form B-1 |
| <input type="checkbox"/> Bulk Variance (signage) | Form B-2 |
| <input type="checkbox"/> Bulk Variance (homeowner) | Form B-3 |
| <input type="checkbox"/> Contribution Disclosure Statement | Form DS-1 |
| <input type="checkbox"/> Conditional Use | N/A |
| <input type="checkbox"/> Informal | N/A |
| <input type="checkbox"/> Interpretation | N/A |
| <input type="checkbox"/> Lot Consolidation | N/A |
| <input type="checkbox"/> Site Plan, Informal | N/A |
| <input type="checkbox"/> Site Plan, Waiver | N/A |
| <input type="checkbox"/> Site Plan, Minor | N/A |
| <input type="checkbox"/> Site Plan, Preliminary Major | N/A |
| <input type="checkbox"/> Site Plan, Final Major | N/A |
| <input checked="" type="checkbox"/> Subdivision, Minor | N/A |
| <input type="checkbox"/> Subdivision, Preliminary Major | N/A |
| <input type="checkbox"/> Subdivision, Final Major | N/A |
| <input type="checkbox"/> Use Variance | Form U-1 |
| <input type="checkbox"/> Other (specify) | N/A |

DEC - 2019

List all accompanying material:

Description	Number Submitted
Minor Subdivision of Lot 27, Block 2310	1
Topographic Survey of " "	1
Detail Sheet of " "	1

List name & address of all expert witnesses expected to testify:

Joseph Moster - Trenton Engineering Co Inc
1195 Taylor St
20100 08 0000

Township of Lawrence
Mercer County NJ
Department of Community Development

General Information

1. **Applicant:**

Name PHAT LE Phone 609-273-2485
Address 165 Eldridge Ave Fax N/A
Lawrenceville NJ 08648 Email phattle@yahoo.com

2. **Owner of land (as shown on current tax records):**

Name PHAT LE + THUY DAO Phone 609-273-2485
Address 165 Eldridge Ave Fax N/A
Lawrenceville NJ 08648 Email phattle@yahoo.com

3. **Attorney (where applicable):**

Name N/A Phone _____
Address _____ Fax _____
_____ Email _____

4. **Engineer (where applicable):**

Name Trenton Engineering Phone 882-0616-
Address 2193 Spruce St Fax _____
Ewing NJ 08638 Email trentonengineering@gmail.com

5. **If the applicant is a corporation or partnership, list the names and addresses of all stock holders or partners owning a 10% or greater interest in said corporation or partnership in accordance with P.L.1977 Ch.336.**

N/A

6. **Location of Land:**

Lot No(s) 27 Block(s) 2310 Tax Map Pg(s) _____
Street(s) 165 Eldridge Ave
Lawrenceville NJ 08648

7. **Zoning designation of parcel (see Zoning Map):** R4

8. **Name of proposed development:** _____

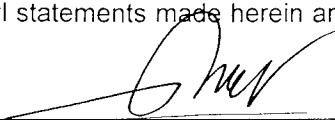
Township of Lawrence
Mercer County NJ
Department of Community Development

Certifications

Certification of applicant:

I/we do hereby certify that all statements made herein and in any documents submitted herewith are true and accurate.

Applicant's signature



Date

12/03/2019

PHAT LE

(Print or type name)

Owner's consent to filing of application:

If the applicant is not the owner of the property, have owner sign below or file with the application a letter signed by the owner consenting to the application.

I am the current owner of the subject property and am aware of and consent to the filing of this application.

Owner's signature

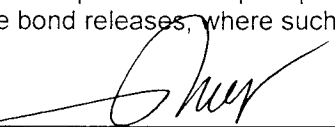
Date

(Print or type name)

Acceptance of reasonable review & inspection costs:

I/we do hereby agree to pay all reasonable costs for professional review of the plan(s) and material submitted herewith and for subsequent township inspection of any improvements to be constructed in connection therewith or future bond releases, where such inspection is required.

Applicant's signature



Date

12/03/2019

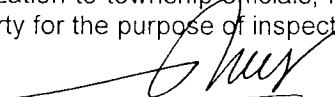
PHAT LE

(Print or type name)

Authorization for township officials to enter upon property:

I/we do hereby grant authorization to township officials, including Planning or Zoning Board members, to enter upon the subject property for the purpose of inspection related to this application.

Owner's signature



Date

12/03/2019.

PHAT LE

(Print or type name)

Request for Taxpayer Identification Number and Certification

Give Form to the
 requester. Do not
 send to the IRS.

Print or type See Specific Instructions on page 2.	1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank. <div style="text-align: center; font-size: 1.2em; font-family: cursive;">PHAT LE</div>
	2 Business name/disregarded entity name, if different from above
	3 Check appropriate box for federal tax classification; check only one of the following seven boxes: <input checked="" type="checkbox"/> Individual/sole proprietor or single-member LLC <input type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶ _____ Note. For a single-member LLC that is disregarded, do not check LLC; check the appropriate box in the line above for the tax classification of the single-member owner. <input type="checkbox"/> Other (see instructions) ▶ _____
	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) _____ Exemption from FATCA reporting code (if any) _____ <i>(Applies to accounts maintained outside the U.S.)</i>
	5 Address (number, street, and apt. or suite no.) <div style="font-size: 1.2em; font-family: cursive;">165 Eldridge Ave</div>
	6 City, state, and ZIP code <div style="font-size: 1.2em; font-family: cursive;">Lawrenceville NJ 08648</div>
	7 List account number(s) here (optional)
	Requester's name and address (optional)

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Note. If the account is in more than one name, see the instructions for line 1 and the chart on page 4 for guidelines on whose number to enter.

Social security number
368 - 86 - 5671
or
Employer identification number

Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
3. I am a U.S. citizen or other U.S. person (defined below); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions on page 3.

Sign Here	Signature of U.S. person ▶	Date ▶ 12/03/2019
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General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. Information about developments affecting Form W-9 (such as legislation enacted after we release it) is at www.irs.gov/fw9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following:

- Form 1099-INT (interest earned or paid)
- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)

- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding? on page 2.

By signing the filled-out form, you:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
2. Certify that you are not subject to backup withholding, or
3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income, and
4. Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See *What is FATCA reporting?* on page 2 for further information.

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Contribution Disclosure Statement

RECIPIENT	AMOUNT	DATE
N/A		

Provide additional pages as necessary