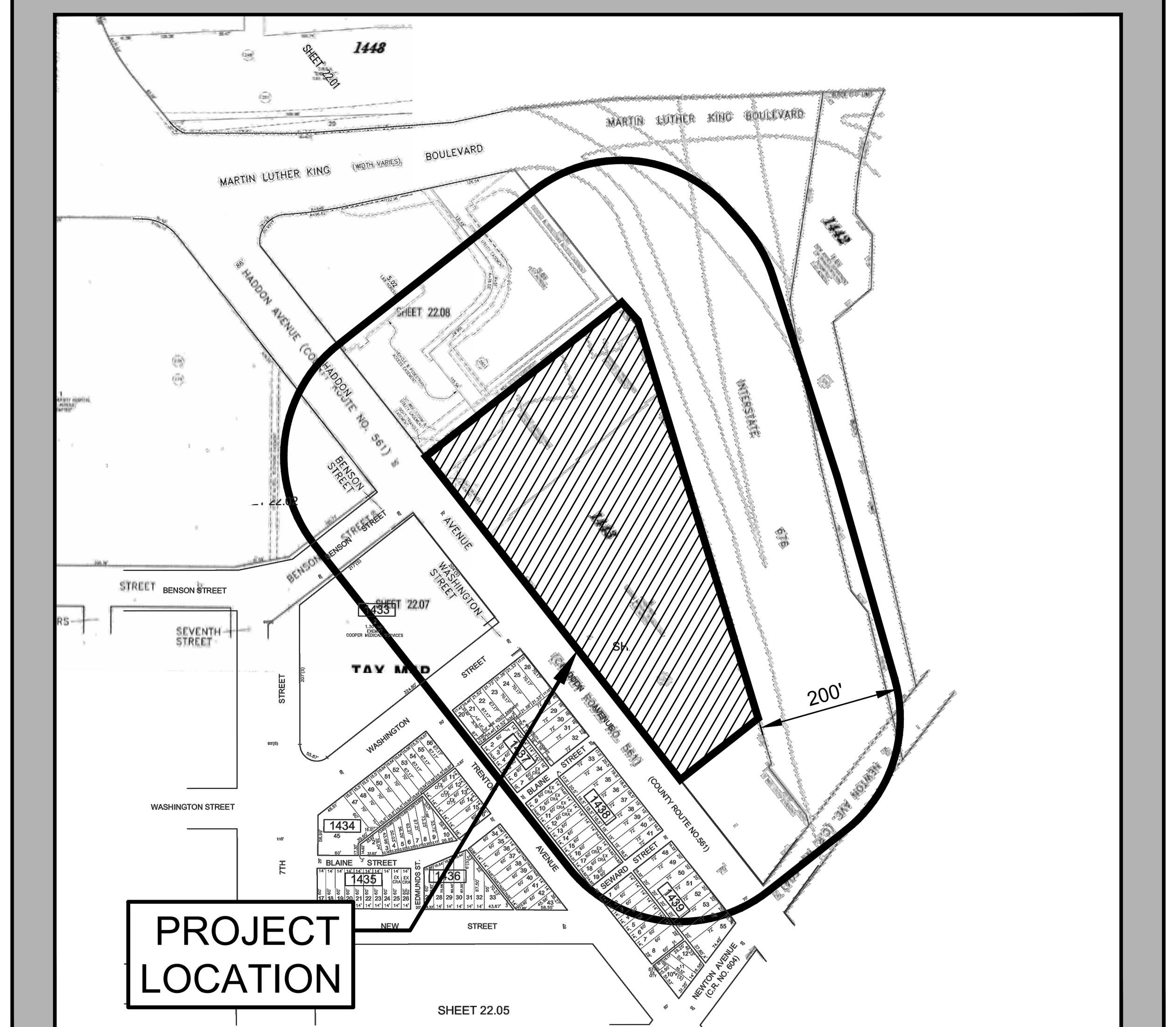
APPLICATION FOR PRELIMINARY & FINAL MAJOR SITE PLAN APPROVAL

COOPER UNIVERSITY HEALTH CARE

WOUND CARE RENOVATION PROJECT

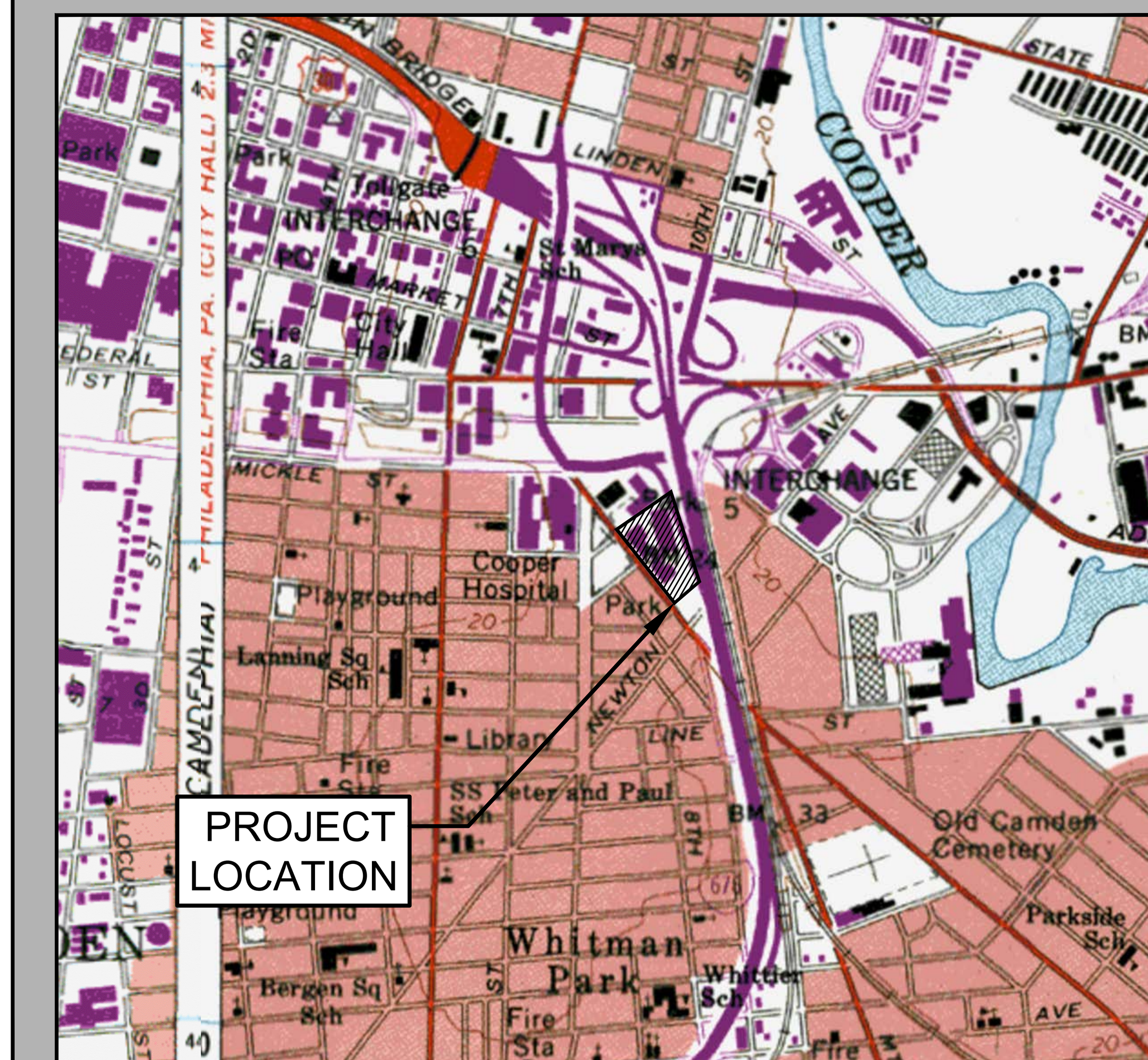
BLOCK 1443 LOT 6

CITY OF CAMDEN, CAMDEN COUNTY, NEW JERSEY



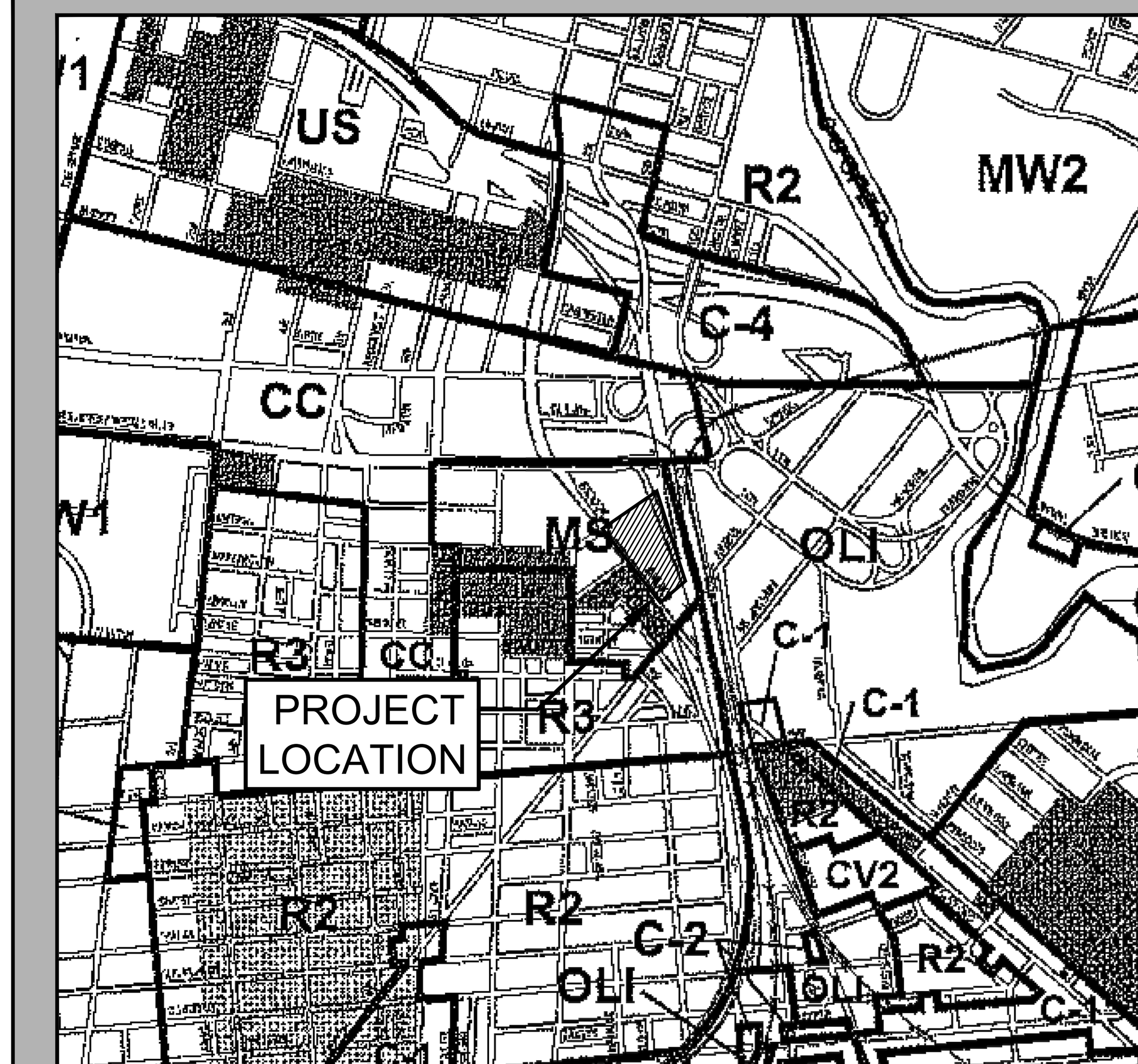
KEY MAP

SOURCE: TAX MAP (SHEET #: 2.14, 4.01, 4.02, 22.01 & 22.02)
CITY OF CAMDEN, CAMDEN COUNTY, NJ
SCALE: 1" = 150'



USGS TOPOGRAPHIC SURVEY KEY MAP

SOURCE: CAMDEN/PHILADELPHIA QUAD
SCALE: 1" = 1,000'



ZONING MAP

SOURCE: CITY OF CAMDEN ZONING MAP
SCALE: 1" = 1,000'

PROPERTIES OWNER LIST WITHIN 200 FT OF SUBJECT PROPERTY
CITY OF CAMDEN, CAMDEN COUNTY, NJ

BLOCK	LOT	OWNER	OWNER ADDRESS	CITY, STATE, ZIP CODE
1402	1	COOPER MEDICAL CENTER; BILL SMITH	1 FEDERAL STREET, #NW-400A	CAMDEN, NJ 08103
1433	2	COOPER MEDICAL SERVICES, INC.	1 COOPER PLAZA	CAMDEN, NJ 08103
1437	23	COOPER PLAZA ASSOCIATES, LLC	P.O. BOX 90708	CAMDEN, NJ 08101
1437	24	COOPER PLAZA ASSOCIATES, LLC	P.O. BOX 90708	CAMDEN, NJ 08101
1437	25	COOPER PLAZA ASSOCIATES, LLC	P.O. BOX 90708	CAMDEN, NJ 08101
1437	26	COOPER PLAZA ASSOCIATES, LLC	P.O. BOX 90708	CAMDEN, NJ 08101
1443	5.01	COOPER PLAZA REALTY, LLC	2 COOPER PLAZA	CAMDEN, NJ 08103
1443	5.02	COOPER HEALTH SYSTEM; BILL SMITH	1 FEDERAL STREET	CAMDEN, NJ 08103
1443	6	COOPER MEDICAL SVS; BILL SMITH	1 FEDERAL STREET, #NW-400A	CAMDEN, NJ 08103
1443	6 (B01)	COOPER MEDICAL SVS; BILL SMITH	1 FEDERAL STREET, #NW-400A	CAMDEN, NJ 08103
1443	6 (X)	COOPER MEDICAL SVS; BILL SMITH	1 FEDERAL STREET, #NW-400A	CAMDEN, NJ 08103

LOCAL UTILITIES

COMPANY	ADDRESS	CITY, STATE, ZIP CODE
AMERICAN WATER	P.O. BOX 52747	PHOENIX, AZ 85072
CAMDEN COUNTY M.U.A.	1645 FERRY AVENUE	CAMDEN, NJ 08104
COMCAST CABLEVISION	1250 HADDONFIELD-BERLIN ROAD	CHERRY HILL, NJ 08034-0404
NEW JERSEY AMERICAN WATER	P.O. BOX 578	ALTON, IL 62002
PUBLIC SERVICE ELECTRIC & GAS	P.O. BOX 790	CRANFORD, NJ 07016-0790
VERIZON	540 BROAD STREET	NEWARK, NJ 07101

ZONING STATISTICS SUMMARY WITHIN THE MEDICAL SUPPORT ZONE (MS) OF THE COOPER PLAZA REDEVELOPMENT PLAN
CITY OF CAMDEN, CAMDEN COUNTY, NJ

ORDINANCE #	CRITERIA	REQUIREMENT	EXISTING	PROPOSED
REDEVELOPMENT PLAN PG. 22	PERMITTED USES	HOSPITAL, MEDICAL CLINIC, HEALTH CARE FACILITIES	HOSPITAL, MEDICAL CLINIC, HEALTH CARE FACILITIES	HOSPITAL, MEDICAL CLINIC, HEALTH CARE FACILITIES
REDEVELOPMENT PLAN PG. 27	MIN. LOT AREA	2,500 SF	161,507 SF	161,507 SF
	MIN. LOT WIDTH	25 FT	147.40'	147.40'
	MIN. BUILDING HEIGHT (NON-RESIDENTIAL)	2 STORIES / 30 FT	5 STORIES	5 STORIES
	MAX. BUILDING HEIGHT (NON-RESIDENTIAL)	10 STORIES / 150 FT	5 STORIES	5 STORIES
	MIN. DEPTH OF FRONT YARD	5 FT	41.9 FT	41.9 FT
	MIN. WIDTH OF SIDE YARD	5 FT	42.8 FT	42.8 FT
	MIN. DEPTH OF REAR YARD	10 FT	45.2 FT	45.2 FT
	MAX. LOT BUILDING COVERAGE	80%	MAIN BUILDING AND GARAGE 43%	MAIN BUILDING AND GARAGE 43%
	MAX. LOT IMPERVIOUS COVERAGE	90%	MAIN BUILDING AND GARAGE 74.1%	MAIN BUILDING AND GARAGE 74.6%
	MAX. FLOOR AREA RATIO (FAR)	10.0	1.08	1.08
REDEVELOPMENT PLAN PG. 33	LANDSCAPING	MIN. 5% SURFACE PARKING LANDSCAPED	0%*	0%*
		PLANTED WITH STREET TREES	STREET TREES PLANTED	STREET TREES PLANTED
		STREET TREES MIN. DISTANCE 40' ON CENTER	25 FT*	25 FT*
REDEVELOPMENT PLAN PG. 34	OFF STREET PARKING: INSTITUTION 1 SPACE / 1,000 SF	174,705 SF / 1,000 SF = 175 SPACES	7 + 1,026 (GARAGE) = 1,033	6 + 1,026 (GARAGE) = 1,032
		HANDICAP MIN. 10% TOTAL PARKING (0.10x1,033 = 104)	20*	20*
§870-189.C	ACCESSORY BUILDING SETBACKS & STRUCTURES			
	FRONT YARD	ACCESSORY BUILDING SHALL NOT OCCUPY FRONT YARD	N/A	N/A
	MIN. DEPTH OF REAR YARD	3 FT	GARAGE: 7.2 FT AHU AND CHILLERS: N/A	GARAGE: 7.2 FT AHU AND CHILLERS: 158.66 FT
	MIN. SIDE YARDS	5 FT	GARAGE: 14.4 FT AHU AND CHILLERS: N/A	GARAGE: 14.4 FT AHU AND CHILLERS: 49.65 FT
	BUILDING COVER	≤ 25% OF REAR YARD REQUIREMENT, OR MAX. OF 750 SF, WHICHEVER IS SMALLER	GARAGE: 35,057 SF* AHU AND CHILLERS: N/A	GARAGE: 35,057 SF* AHU AND CHILLERS: 936 SF**
§870-189.G	MAX. ACCESSORY BUILDING HEIGHT	10 FT	N/A	AHU AND CHILLERS HEIGHT: 5 FT
§870-197.F	FENCES	NO MORE THAN 6' TALL ALONG REAR LOT LINE, AND ALONG SIDE LOT LINE TO FRONT OF BUILDING	6 FT	6 FT
		NO MORE THAN 4' TALL ALONG SIDE LOT LINE TO FROM FRONT BUILDING LINE TO FRONT LOT LINE AND ALONG FRONT LOT LINE	6 FT*	N/A

* VARIANCE REQUESTED FOR CONTINUATION OF EXISTING NON-CONFORMANCE
** NEW VARIANCE/WAIVER REQUESTED
NOTE: EXISTING AND PROPOSED SITE DATA OTHER THAN IMPROVEMENTS ASSOCIATED PROPOSED AHU AND CHILLER IMPROVEMENTS TAKEN FROM PLAN ENTITLED, "BOUNDARY SURVEY, BLOCK 1400, LOTS 55, 56-65, BLOCK 1401, LOT 33, BLOCK 1402, LOT 1, BLOCK 1443, LOTS 5.01, 5.02 & 6", PREPARED BY LANGAN, DATED 01/19/2016.

LIST OF DRAWINGS

LIST OF VARIANCES AND WAIVERS

1. **REDEVELOPMENT CODE SECTION III, PAGE 23 - ACCESSORY STRUCTURE - AHU AND CHILLERS**
2. REDEVELOPMENT CODE PAGE 33, SECTION E - MIN. 5% SURFACE PARKING LANDSCAPED (PRE-EXISTING)
3. REDEVELOPMENT CODE PAGE 33, SECTION E - STREET TREE MINIMUM DISTANCE (PRE-EXISTING)
4. REDEVELOPMENT CODE PAGE 34, SECTION F.8 - HANDICAP PARKING SPACES (PRE-EXISTING)
5. SECTION 870-189.C - BUILDING COVERAGE (GARAGE - PRE-EXISTING)

OWNER / APPLICANT

COOPER UNIVERSITY HEALTH CARE
1 COOPER PLAZA
CAMDEN, NJ 08103
(856)-342-2000

APPROVALS

PLANNING BOARD CHAIRMAN — DATE

PLANNING BOARD SECRETARY — DATE

I HAVE CAREFULLY EXAMINED THIS PLAN AND TO THE BEST OF MY KNOWLEDGE AND BELIEF FIND IT CONFORMS TO THE APPLICABLE CONDITIONS OF THE PLANNING BOARD APPROVAL AND THE TOWNSHIP ORDINANCES AND REQUIREMENTS THERETO. THIS PLAN IS HEREBY APPROVED BY THE OFFICE OF THE CITY OF CAMDEN PLANNING BOARD ENGINEER:

CITY OF CAMDEN PLANNING BOARD ENGINEER — DATE

ZONING OFFICER / ADMINISTRATIVE OFFICER — DATE

REV. / ISSUE	DATE	DESCRIPTION

CONSULTANT

ORIENTATION / KEY PLAN

CLIENT

Cooper University Health Care

PAULUS, SOKOLOWSKI AND SARTOR, LLC.
1415 ROUTE 70 EAST
SUITE 305
CHERRY HILL, NJ 08034
PHONE: (856) 335-6010
CERTIFICATE OF AUTHORIZATION NO. 24GA28032700

ALL DIMENSIONS MUST BE VERIFIED BY THE CONTRACTOR. NOTIFY PAULUS, SOKOLOWSKI AND SARTOR, LLC. OF ANY CONFLICTS, ERRORS, AMBIGUITIES OR DISCREPANCIES IN THE CONTRACT DRAWINGS OR SPECIFICATIONS BEFORE PROCEEDING WITH CONSTRUCTION.

ALL DIMENSIONS SHALL BE AS NOTED IN WORDS OR NUMBERS ON THE CONTRACT DRAWINGS. DO NOT SCALE THE DRAWINGS TO DETERMINE DIMENSIONS.

THESE CONTRACT DRAWINGS CONTAIN DATA INTENDED SPECIFICALLY FOR THE NOTED PROJECT AND CLIENT. THEY ARE NOT INTENDED FOR USE ON EXTENSIONS OF THIS PROJECT OR FOR REUSE ON ANY OTHER PROJECT.

THE COPYING AND/OR MODIFICATION OF THIS DOCUMENT OR ANY PORTION THEREOF WITHOUT THE WRITTEN PERMISSION OF PAULUS, SOKOLOWSKI AND SARTOR, LLC. IS PROHIBITED.

UNLESS THESE DRAWINGS ARE SPECIFICALLY DESIGNATED AS "CONSTRUCTION ISSUE", THESE DRAWINGS SHALL NOT BE USED FOR CONSTRUCTION OR IMPROVEMENTS DEPICTED HEREIN, CONTRACTORS SHALL NOTIFY THE DESIGN ENGINEER TO OBTAIN CONSTRUCTION DOCUMENTS.

MATTHEW J. WALSH, P.E.
PROFESSIONAL ENGINEER
N.J. LIC. NO. 24GE05689100

SIGNATURE

PROJECT
COOPER UNIVERSITY HEALTH CARE

SHERIDAN PAVILION
MRI & CT ALTERATIONS

BLOCK 1443, LOT 6
CITY OF CAMDEN, CAMDEN COUNTY, NEW JERSEY

SHEET TITLE

COVER SHEET

PROJECT NO.:	04404.0032	DRAWN BY:	MGK
SCALE:	AS SHOWN	CHECKED BY:	MJW
DATE:	10/15/2025	SHEET	1 OF 4

SHEET NO. C-01

REV. / ISSUE	DATE	DESCRIPTION

CONSULTANT

ORIENTATION / KEY PLAN

GRAPHIC SCALE
50 0 25 50 100
(IN FEET)
1 inch = 50 ft.

CLIENT

Cooper University Health Care

PAULUS, SOKOLOWSKI AND SARTOR, LLC.

1415 ROUTE 70 EAST
SUITE 305
CHERRY HILL, NJ 08034
PHONE: (856) 335-8010

CERTIFICATE OF AUTHORIZATION NO. 24GA28032700

MATTHEW J. WALSH, P.E.
PROFESSIONAL ENGINEER
N.J. LIC. NO. 24GE05689100

SIGNATURE

PROJECT

COOPER UNIVERSITY HEALTH CARE

SHERIDAN PAVILION
MRI & CT ALTERATIONS

BLOCK 1443, LOT 6
CITY OF CAMDEN, CAMDEN COUNTY, NEW JERSEY

SHEET TITLE

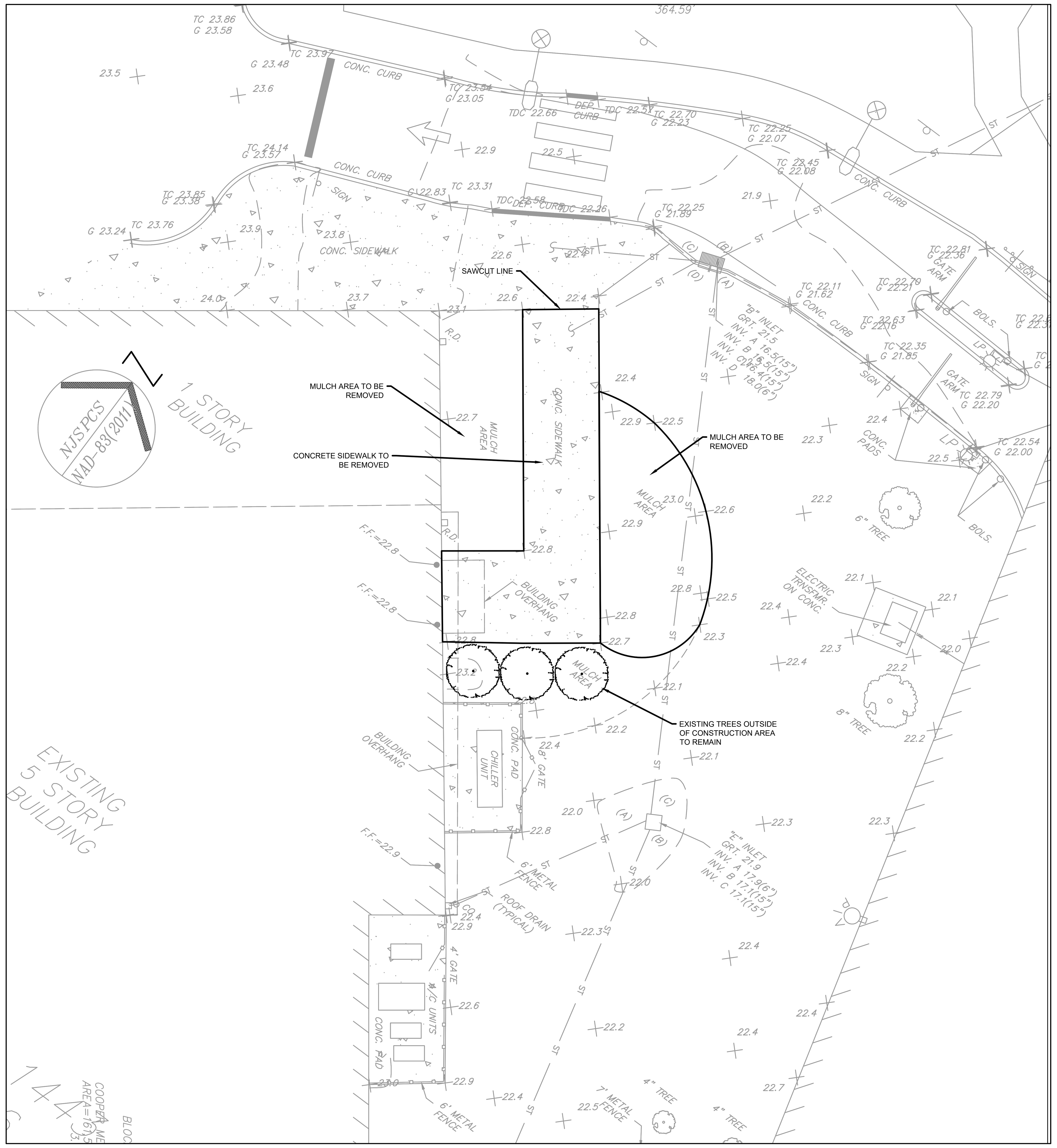
OVERALL LOCATION PLAN

PROJECT NO.:	04404.0032	DRAWN BY:	MGK
SCALE:	1" = 50'	CHECKED BY:	MJW
DATE:	10/15/2025	SHEET	2 OF 4

SHEET NO.

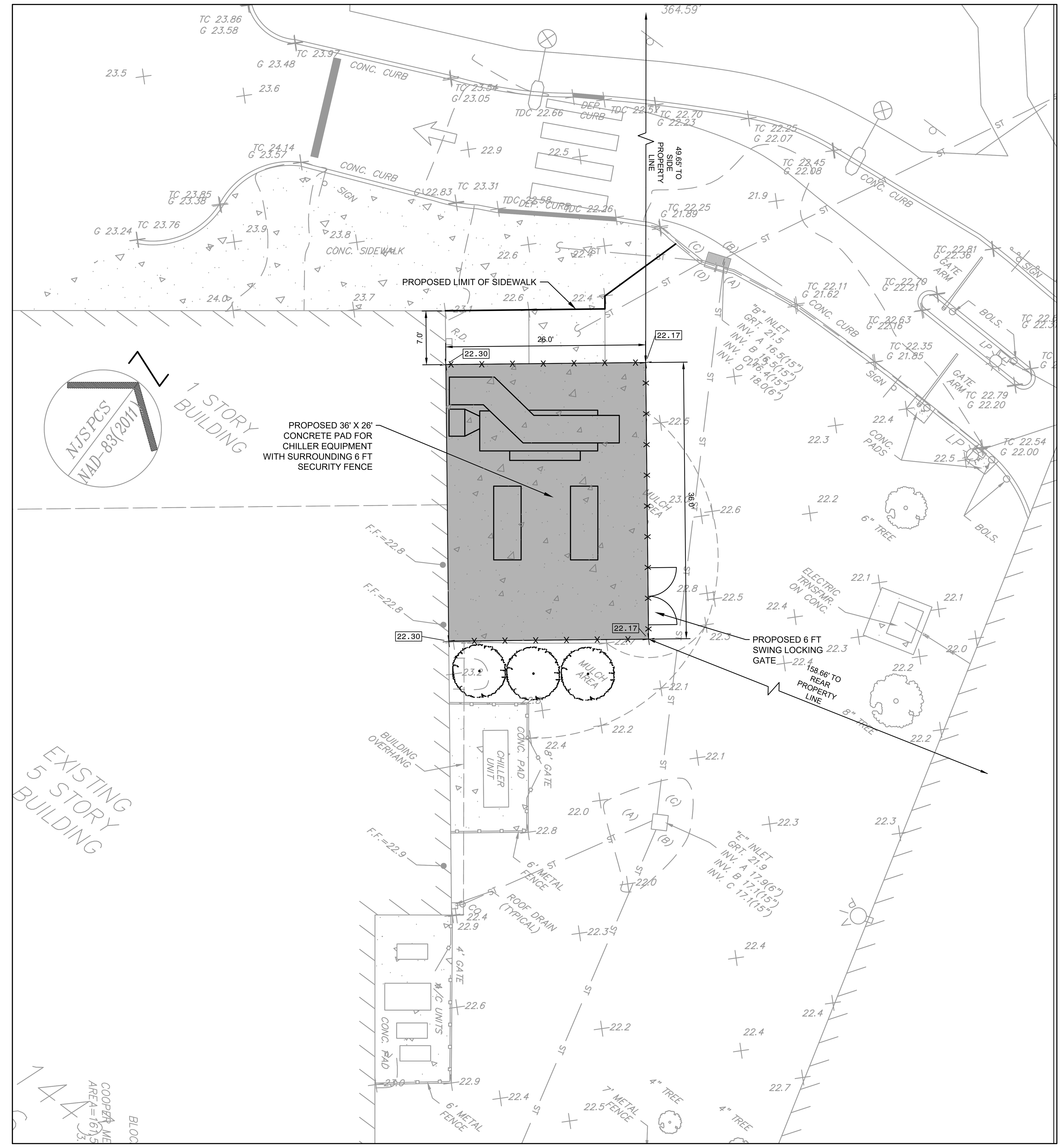
C-02

FILENAME: P:\04404\0032\DWG\C-Civil\Plans\04404-0032-C-02.5 Key Plan.dwg LAST EDIT: 10/15/2025 - 03:25:15 PM LOGIN: mjwalsh



EXISTING CONDITIONS & DEMOLITION PLAN

SCALE: 1" = 10'



SITE AND GRADING PLAN

SCALE: 1" = 10'

NOTE:

1. CONTRACTOR TO COORDINATE CONNECTION INTO BUILDING WITH ARCHITECT AND MECHANICAL ENGINEER.
2. EQUIPMENT SHOWN FOR SCHEMATIC PURPOSES ONLY, FINAL SIZE AND CONFIGURATION BY OTHERS.

REV. / ISSUE	DATE	DESCRIPTION

CONSULTANT

ORIENTATION / KEY PLAN

GRAPHIC SCALE

10 0 5 10 20

(IN FEET)
1 inch = 10 ft.

CLIENT

Cooper University Health Care

PAULUS, SOKOLOWSKI AND SARTOR, LLC.
1415 ROUTE 70 EAST
SUITE 305
CHERRY HILL, NJ 08034
PHONE: (856) 335-6010
CERTIFICATE OF AUTHORIZATION NO. 24GA28032700

ALL DIMENSIONS MUST BE VERIFIED BY THE CONTRACTOR. NOTIFY PAULUS, SOKOLOWSKI AND SARTOR, LLC. OF ANY CONFLICTS, ERRORS, AMBIGUITIES OR DISCREPANCIES IN THE CONTRACT DRAWINGS OR SPECIFICATIONS BEFORE PROCEEDING WITH CONSTRUCTION.

ALL DIMENSIONS SHALL BE AS NOTED IN WORDS OR NUMBERS ON THE CONTRACT DRAWINGS. DO NOT SCALE THE DRAWINGS TO DETERMINE DIMENSIONS.

THESE CONTRACT DRAWINGS CONTAIN DATA INTENDED SPECIFICALLY FOR THE NOTED PROJECT AND CLIENT. THEY ARE NOT INTENDED FOR USE ON EXTENSIONS OF THIS PROJECT OR FOR REUSE ON ANY OTHER PROJECT.

UNLESS THESE DRAWINGS ARE SPECIFICALLY DESIGNATED AS "CONSTRUCTION ISSUE", THESE DRAWINGS SHALL NOT BE USED FOR CONSTRUCTION OR IMPROVEMENTS DEPICTED HEREIN, CONTRACTORS SHALL NOTIFY THE DESIGN ENGINEER TO OBTAIN CONSTRUCTION DOCUMENTS.

MATTHEW J. WALSH, P.E.
PROFESSIONAL ENGINEER
N.J. LIC. NO. 24GE05689100

SIGNATURE

PROJECT

COOPER UNIVERSITY HEALTH CARE

SHERIDAN PAVILION MRI & CT ALTERATIONS

BLOCK 1443, LOT 6
CITY OF CAMDEN, CAMDEN COUNTY, NEW JERSEY

SHEET TITLE

EXISTING CONDITIONS & SITE PLAN

PROJECT NO.:	04404.0032	DRAWN BY:	MGK
SCALE:	1" = 10'	CHECKED BY:	MJW
DATE:	10/15/2025	SHEET 3 OF 4	
SHEET NO.	C-03		

REFERENCE AND BASE INFORMATION NOTES

1. ALL PROPOSED WORK SHOWN LIES WITHIN THE CITY OF CAMDEN, CAMDEN COUNTY, NEW JERSEY.
2. SITE SPECIFIC TOPOGRAPHIC AND UTILITY INFORMATION SHOWN IS BASED ON PLAN ENTITLED, "COOPER HOSPITAL OXYGEN TANK PAD AREA, CITY OF CAMDEN, CAMDEN COUNTY, NEW JERSEY, PARTIAL TOPOGRAPHIC & UTILITY SURVEY", DATED 10/20/2023, PREPARED BY PAULUS, SOKOLOWSKI AND SARTOR, LLC.
3. OVERALL SITE BOUNDARY AND PLANIMETRIC, INFORMATION SHOWN IS TAKEN FROM PLAN ENTITLED, "BOUNDARY SURVEY, BLOCK 1400, LOTS 55, 56-65, BLOCK 1401, LOT 33, BLOCK 1402, LOT 1, BLOCK 1443, LOTS 5.01, 5.02 & 6" PREPARED BY LANGAN, DATED 01/19/2016.
4. PLANS ENTITLED, "COOPER UNIVERSITY HEALTH CARE, WOUND CARE RENOVATION PROJECT", PREPARED BY PAULUS, SOKOLOWSKI & SARTOR, LLC, DATED 11/28/2023, ISSUED FOR DCA REVIEW.
5. HORIZONTAL CONTROL IS BASED ON NAD83. VERTICAL CONTROL IS BASED ON NAVD88.
6. EXCEPT WHERE SPECIFICALLY NOTED, EXISTING FEATURES ARE SHOWN IN HALF TONE AND PROPOSED FEATURES ARE SHOWN IN FULL TONE.

GENERAL NOTES

1. THE PURPOSE OF THESE PLANS IS TO SECURE SITE PLAN APPROVAL FROM THE CITY OF CAMDEN, FOR CONSTRUCTION OF ONE CONCRETE PAD TO SUPPORT AHU AND CHILLER EQUIPMENT, FENCING AND ASSOCIATED IMPROVEMENTS AS PART OF THE COOPER UNIVERSITY HEALTH CARE SHERIDAN RENOVATION PROJECT.
2. DCA ISSUED FOR CONSTRUCTION PLANS ARE SUBJECT TO THE CITY OF CAMDEN ADMINISTRATIVE REVIEW AND APPROVAL PRIOR TO CONSTRUCTION OR ORDERING OF MATERIALS.
3. THE OFFICE OF THE MUNICIPAL ENGINEER SHALL BE NOTIFIED IN ADVANCE OF COMMENCEMENT OF CONSTRUCTION OF ANY IMPROVEMENTS UNDER ITS JURISDICTION.
4. CONTRACTOR SHALL COORDINATE UTILITY MARK OUTS 72 HOURS PRIOR TO ANY DISTURBANCE. CONTRACTOR MUST NOTIFY "NEW JERSEY ONE-CALL" (800-272-1000) PRIOR TO ANY EXCAVATION OR GRADING ACTIVITY.
5. THE CONTRACTOR SHALL PROVIDE SUCH TEMPORARY DRAINAGE, SOIL EROSION, AND DUST CONTROL MEASURES AS MAY BE DIRECTED BY THE MUNICIPAL ENGINEER OR OTHER AGENCIES OR DEPARTMENTS TO SATISFY ENVIRONMENTAL CONCERNS.
6. THE INSTALLATION OF UTILITIES MUST BE COORDINATED WITH BUILDING IMPROVEMENTS TO ASSURE THE WELL-BEING OF LIFE AND PROPERTY DURING CONSTRUCTION. WATER SERVICE IS A PRIMARY NEED AND MUST BE SCHEDULED ACCORDINGLY. WATER SUPPLY AND HYDRANT CONNECTIONS ARE TO BE ESTABLISHED AS A PRIORITY DURING INITIAL SITE DEVELOPMENT TO ASSURE ADEQUATE WATER FOR FIREFIGHTING DURING ALL PHASES OF CONSTRUCTION.
7. AS INDICATED IN THE "MANUAL ON UNIFORM TRAFFIC CONTROL DEVICES" SUFFICIENT CONSTRUCTION WARNING SIGNS ARE TO BE PROVIDED AND MAINTAINED BY CONTRACTORS PERFORMING CONSTRUCTION WORK. SAID SIGNS ARE TO BE MAINTAINED UNTIL CONSTRUCTION IS COMPLETED AND APPROVED BY THE APPROPRIATE MUNICIPAL INSPECTION PERSONNEL. NO CONSTRUCTION THAT IN ANY WAY INTERFERES WITH ROADWAY TRAFFIC SHALL COMMENCE UNTIL THE APPROPRIATE CONSTRUCTION WARNING SIGNS ARE INSTALLED AND INSPECTED BY THE MUNICIPAL ENGINEER. ALL SUCH SIGNAGE, STRIPING, PARKING AND TRAFFIC CIRCULATION SHALL BE IN ACCORDANCE WITH THE "MANUAL ON UNIFORM TRAFFIC CONTROL DEVICES", AS AMENDED, AS WELL AS THE REQUIREMENTS OF THE MUNICIPALITY AND NJDOT.
8. CONTRACTOR SHALL COMPLY WITH THE REQUIREMENTS OF THE MUNICIPAL CONSTRUCTION GUIDELINES FOR STREET OPENINGS WITHIN THE PUBLIC RIGHT OF WAY.
9. ALL ROADWAYS ARE TO BE PASSABLE FOR FIRE DEPARTMENT USE DURING CONSTRUCTION. ANY ROADWAY CLOSURE OR RELOCATION SHALL BE COORDINATED BY THE CONTRACTOR WITH THE FIRE DEPARTMENT TO ENSURE ADEQUATE FIRE PROTECTION FOR ALL AREAS AT ALL TIMES. THE CONTRACTOR SHALL BE RESPONSIBLE FOR INSTALLING WARNING SIGNS, BARRICADES, AND ANY AND ALL SAFETY MEASURES AS MAY BE REQUIRED BY LOCAL CODES, OSHA AND/OR MUTCD.
10. LOCATION OF EXISTING INLETS, CATCH BASINS AND MANHOLES MUST BE FIELD VERIFIED BEFORE WORK MAY COMMENCE. ANY CONFLICTING INFORMATION FROM THAT SHOWN SHALL BE BROUGHT TO THE IMMEDIATE ATTENTION OF THE ENGINEER.
11. SUBSTITUTIONS OF PROPRIETARY MATERIAL AND/OR PRODUCT SPECIFICATIONS THAT NOTE "OR EQUAL" MUST BE APPROVED BY THE DESIGN ENGINEER. IT SHALL BE THE CONTRACTOR'S RESPONSIBILITY TO DEMONSTRATE TO THE SATISFACTION OF THE DESIGN ENGINEER THAT THE SUBSTITUTION IS EQUAL.
12. IT IS NOT THE INTENT OF THESE PLANS TO PROVIDE REINFORCING STEEL AND CONCRETE DESIGNS FOR ANY PRE-CAST OR POURED-IN-PLACE CONCRETE STRUCTURES, OTHER THAN THE REINFORCING STEEL AND CONCRETE DESIGNS SPECIFICALLY NOTED ON THESE PLANS. ANY REINFORCING STEEL AND CONCRETE DESIGN MUST BE SUPPLIED, SIGNED & SEALED BY THE PRE-CAST MANUFACTURER OR A REPUTABLE LICENSED STRUCTURAL ENGINEER IN THE STATE OF NEW JERSEY REPRESENTING THE CONTRACTOR AND SHALL BE INCLUDED IN THE SHOP DRAWING SUBMITTAL SUBJECT TO REVIEW BY PS&S.
13. THE CONTRACTOR SHALL PREPARE AS-BUILT DRAWINGS FOR ALL UNDERGROUND IMPROVEMENTS INSTALLED DURING CONSTRUCTION, ETC. AS-BUILT DRAWINGS MUST BE SIGNED & SEALED BY A NJ PROFESSIONAL ENGINEER OR LAND SURVEYOR. THE AS-BUILT SURVEY DRAWINGS MUST COMPLY WITH UTILITY OWNER STANDARDS/REQUIREMENTS. COPIES SHALL BE SUBMITTED TO UTILITY COMPANY AND/OR OWNER.
14. ALL CONSTRUCTION SHOWN HEREIN SHALL CONFORM TO MUNICIPAL AND COUNTY STANDARDS, CONSTRUCTION DETAILS, AND SPECIFICATIONS APPLICABLE AS WELL AS THE NJDOT STANDARD SPECIFICATIONS FOR ROAD AND BRIDGE CONSTRUCTION, LATEST EDITION, UNLESS SPECIFICALLY NOTED OTHERWISE. IN CASE OF CONFLICT, THE MORE RESTRICTIVE SHALL GOVERN. CONTRACTOR SHALL NOTIFY DESIGN ENGINEER OF ALL CONFLICTS.

NOTES ON THE USE OF PLANS

1. UNLESS THESE DRAWINGS ARE SPECIFICALLY DESIGNATED AS "CONSTRUCTION ISSUE," THESE DRAWINGS OR THE IMPROVEMENTS DEPICTED HEREIN SHALL NOT BE USED FOR CONSTRUCTION. CONTRACTORS SHALL NOTIFY THE DESIGN ENGINEER TO OBTAIN CONSTRUCTION DOCUMENTS. DCA ISSUED FOR CONSTRUCTION ARE NOT "CONSTRUCTION ISSUE".
2. ALL DIMENSIONS MUST BE VERIFIED BY THE CONTRACTOR. NOTIFY PAULUS, SOKOLOWSKI AND SARTOR OF ANY CONFLICTS, ERRORS, AMBIGUITIES OR DISCREPANCIES IN THE CONTRACT DRAWINGS OR SPECIFICATIONS BEFORE PROCEEDING WITH CONSTRUCTION.
3. INFORMATION FOR DESIGN LAYOUT IS CONTAINED SOLELY IN THE WRITTEN DIMENSIONS, BEARINGS, AND ANGLES CONTAINED ON THE DRAWINGS. DO NOT SCALE THE DRAWINGS TO DETERMINE DIMENSIONS..
4. THESE CONTRACT DRAWINGS CONTAIN DATA INTENDED SPECIFICALLY FOR THE NOTED PROJECT AND CLIENT. THEY ARE NOT INTENDED FOR USE ON EXTENSIONS OF THIS PROJECT OR FOR REUSE ON ANY OTHER PROJECT. THE COPYING AND/OR MODIFICATION OF THIS DOCUMENT OR ANY OTHER PORTION THEREOF WITHOUT THE WRITTEN PERMISSION OF PAULUS, SOKOLOWSKI, AND SARTOR IS PROHIBITED.
5. THIS DIMENSIONAL INFORMATION IS NOT WARRANTED NOR SHOULD IT BE CONSIDERED AS COMPLETE FOR EVERY ASPECT OF THE LAYOUT. STANDARD PRACTICE REQUIRES THAT THE LAYOUT PERSON CHECK THE DIMENSIONAL DATA CONSISTENCY AND TO MAKE SURVEY CALCULATIONS WHICH ARE CUSTOMARY FOR CONSTRUCTION LAYOUT. IN THE EVENT A QUESTION OR INCONSISTENCY IS DISCOVERED, THE USER SHOULD IMMEDIATELY NOTIFY THE ENGINEER OF RECORD.
6. THE GRAPHICAL INFORMATION CONTAINED IN ELECTRONIC FILES IS INTENDED AS DRAWING DATA ONLY, IT IS NOT INTENDED TO SERVE AS SURVEY LAYOUT DATA.
7. ALL SITEWORK UTILITIES TO BE INSTALLED BY SITE CONTRACTOR TO A POINT (5) FIVE FEET FROM THE BUILDING STRUCTURE IN ACCORDANCE WITH INDUSTRY STANDARDS UNLESS SPECIFICALLY SHOWN OTHERWISE. SITE CONTRACTOR TO COORDINATE WITH BUILDING TRADES CONTRACTOR TO ENSURE COORDINATION OF UTILITY CONNECTION LOCATIONS AND MATERIAL SPECIFICATIONS. REPORT ANY DISCREPANCIES IMMEDIATELY TO THE ENGINEER OF RECORD.
8. ALL DIMENSIONAL INFORMATION SHOWN HEREON INDICATING BUILDINGS IS BASED UPON FACE OF BUILDING. ALL ROADWAY DIMENSIONS ARE TO INSIDE FACE OF CURBING. ALL SIDEWALK DIMENSIONS ARE TO OUTSIDE FACE OF CURBING.

SHOP DRAWING SUBMITTALS

1. THE CONTRACTOR SHALL SUBMIT ALL SHOP DRAWINGS FOR ALL COMPONENTS OF A UNIT OF CONSTRUCTION (EG. PRECAST STRUCTURE WITH FRAME AND CASTING, PIPE MATERIAL, JOINT TYPE, AND LADDER RUNGS).
2. SUBSTITUTIONS OF PROPRIETARY MATERIAL AND/OR PRODUCT SPECIFICATIONS THAT NOTE "OR EQUAL" MUST BE APPROVED BY THE DESIGN ENGINEER. IT SHALL BE THE CONTRACTOR'S RESPONSIBILITY TO DEMONSTRATE TO THE SATISFACTION OF THE DESIGN ENGINEER THAT THE SUBSTITUTION IS EQUAL AND ACCEPTABLE.
3. SHOP DRAWINGS AND OTHER SUBMITTALS SHALL BE PROVIDED A MINIMUM OF 12 DAYS IN ADVANCE OF CONTRACTOR'S NEED.
4. INVERT ELEVATIONS AS INDICATED ON SHOP DRAWINGS WILL BE VERIFIED. STRUCTURE OPENINGS WILL NOT BE REVIEWED AND ARE THE RESPONSIBILITY OF THE CONTRACTOR.

DEMOLITION NOTES

1. PRIOR TO THE START OF GRADING AND CLEARING OPERATIONS, THE CONTRACTOR SHALL INSTALL ORANGE COLORED FENCING ALONG THE LIMITS OF GRADING TO DELINEATE THE PROTECTED NATURAL AREAS FROM DAMAGE
2. ALL EXISTING STRUCTURES AND UTILITIES NOT INDICATED TO BE REMOVED SHALL BE LOCATED, IDENTIFIED AND PROTECTED FROM DAMAGE THROUGHOUT THE CONSTRUCTION PERIOD. ALL STRUCTURES DAMAGED DURING CONSTRUCTION SHALL BE REPAIRED AT THE CONTRACTORS EXPENSE AND TO THE SATISFACTION OF THE OWNER. PROVIDE TEMPORARY SERVICES DURING INTERRUPTIONS TO EXISTING UTILITIES AS ACCEPTABLE TO THE OWNER.
3. ALL TEMPORARY STORAGE EQUIPMENT/DUMPSTERS PROVIDED BY THE CONTRACTOR SHALL BE MAINTAINED PROPERLY AND DISPOSED OF BY THE CONTRACTOR UPON COMPLETION OF THE WORK. LOCATIONS TO BE A MINIMUM OF 15 FEET FROM BUILDINGS AND AS APPROVED BY THE OWNER.
4. ANY UTILITIES NOT OR ROOF DRAINS SHOWN ON THE PLANS BUT UNCOVERED IN THE FIELD SHALL BE VERIFIED FOR ITS STATUS (ACTIVE OR ABANDONED). THE UTILITIES CONFIRMED ABANDONED SHALL BE COMPLETELY REMOVED (WITHIN THE LIMITS OF THE WORK) AND DISPOSED OF OFF SITE AS PART OF THIS WORK. ANY DISRUPTION TO ACTIVE UTILITIES MUST BE REPAIRED BY THE CONTRACTOR WITHIN 24 HOURS OF THE DISRUPTION AT THE CONTRACTORS EXPENSE AND TO THE SATISFACTION OF THE OWNER. IF ROOF DRAIN IS TO REMAIN, CONTRACTOR TO ENSURE THE LINE REMAINS OPERABLE FOR FUTURE USE. IF OWNER REQUESTS, LINE SHALL BE REROUTED OUTSIDE OF IMPROVED AREAS.
5. ALL MATERIAL REMOVED SHALL BE SEGREGATED BY MATERIAL TYPE AND DISPOSED OF PER LOCAL, NJDEP, USEPA AND OTHER APPLICABLE REGULATORY AUTHORITY REGULATIONS.
6. IF HAZARDOUS MATERIALS ARE ENCOUNTERED DURING DEMOLITION, THE CONTRACTOR SHALL IMMEDIATELY STOP WORK AND REPORT SUCH FINDINGS TO THE OWNER'S REPRESENTATIVE WHO WILL ARRANGE FOR TESTING AND BE RESPONSIBLE FOR THE PERFORMANCE OF ANY SERVICES IN CONNECTION WITH IDENTIFYING OR THE REMOVAL OF SUCH MATERIALS.
7. DEWATERING: PREVENT SURFACE WATER AND SUBSURFACE OR GROUND WATER FROM FLOWING INTO EXCAVATIONS AND FROM FLOODING PROJECT SITE AND SURROUNDING AREAS. CONTRACTOR SHALL BE RESPONSIBLE FOR DEVELOPING AND IMPLEMENTING MEANS AND METHODS NECESSARY TO DEWATER THE PROJECT SITE AND FACILITATE COMPACTION OF BACKFILL AS REQUIRED.
8. DO NOT ALLOW WATER TO ACCUMULATE IN EXCAVATIONS. REMOVE WATER TO PREVENT SOFTENING OF BOTTOMS AND SOIL CHANGES DETRIMENTAL TO STABILITY OF SUBGRADE. PROVIDE AND MAINTAIN PUMPS, WELL POINTS, SUMPS, SUCTION AND DISCHARGE LINES, AND OTHER DEWATERING SYSTEM COMPONENTS NECESSARY TO CONVEY WATER AWAY FROM EXCAVATIONS. DEWATERING SYSTEMS SHALL BE INSTALLED AND OPERATED SUCH THAT UPWARD FLOW OF GROUNDWATER IS PREVENTED AND THE BEARING STRENGTH OF THE SUBGRADE SOILS IS NOT AFFECTED.
9. CONTRACTOR SHALL PROVIDE ADEQUATE TEMPORARY COVER (CRUSHED STONE, STEEL PLATES OR OTHER MEANS) OVER ALL ACTIVE UNDERGROUND UTILITY PIPING DURING CONSTRUCTION IN ORDER TO PROTECT PIPING WHICH MAY NOT HAVE ENOUGH COVER (BELOW FINISHED GRADE) TO WITHSTAND CONSTRUCTION EQUIPMENT LOAD.
10. BEGINNING OF DEMOLITION/CONSTRUCTION SHALL INDICATE THAT THE CONTRACTOR ACCEPTS THE EXISTING CONDITIONS.
11. TEMPORARY STAGING AREA FOR THE PROPOSED WORK SHALL BE AS DIRECTED BY THE OWNERS REPRESENTATIVE.
12. TRENCH EXCAVATION, IF REQUIRED FOR UTILITIES IN PAVED AREAS, SHALL BE BACK FILLED WITH COMPACTED DENSE GRADED AGGREGATE CONFORMING TO NJDOT SPECIFICATION SECTION 901 UP TO PAVEMENT SUBBASE.
13. BITUMINOUS PAVEMENT CONSTRUCTION/REPAIR SHALL BE IN ACCORDANCE WITH NJDOT AND PROJECT SPECIFICATIONS/DETAILS.
14. THE CONTRACTOR SHALL NOTIFY THE OWNERS REPRESENTATIVE, MUNICIPAL ENGINEER, AND "SUPER SNOOPER" (1-800-272-1000) AT LEAST 72 HOURS PRIOR TO ANY SITE DISTURBANCE.
15. CONTRACTOR SHALL VERIFY THAT ALL STORM SEWERS LOCATED WITHIN THE PROJECT AREA ARE CLEAN AND FREE OF ANY DEBRIS OR BLOCKAGE. CONTRACTOR SHALL NOTIFY THE OWNERS REPRESENTATIVE IF ANY STORM SEWER REQUIRES CLEANING OR RESTORATION.
16. THE IMPORTED FILL/BACKFILL SOIL SHALL BE SAMPLED IN ACCORDANCE WITH APPLICABLE NJDEP STANDARDS.

UTILITY INSTALLATION NOTES

1. ATTENTION OF THE CONTRACTOR IS DIRECTED TO THE FACT THAT THE LOCATION OF KNOWN UTILITY STRUCTURES AND FACILITIES THAT MAY BE ENCOUNTERED WITHIN AND ADJACENT TO THE LIMITS OF WORK AS SHOWN ON THE PLANS IS APPROXIMATE. THE ACCURACY AND COMPLETENESS OF THIS INFORMATION IS NOT GUARANTEED BY THE ENGINEER. THE CONTRACTOR SHALL VERIFY IN THE FIELD ALL THE FACTS CONCERNING THE UTILITY INFORMATION, LOCATIONS AND OTHER CONSTRUCTION OBSTACLES PRIOR TO CONSTRUCTION. FURTHER, THE CONTRACTOR SHALL NOTIFY THE ENGINEER IN WRITING PRIOR TO CONSTRUCTION OF ANY DISCREPANCIES WHICH MAY AFFECT PROJECT DESIGN AND/OR SCOPE. PS&S ASSUMES NO LIABILITY FOR ANY OF THE EXISTING UTILITY INFORMATION SHOWN HEREIN, EXISTING UTILITY LINE LOCATIONS ARE SHOWN FOR SCHEMATIC PURPOSES ONLY AND MAY NOT REPRESENT ALL EXISTING UTILITIES.
2. EXISTING STREET SURFACES AND OTHER SURFACES DISTURBED BY THE CONSTRUCTION OF FACILITIES FOR THIS PROJECT SHALL BE RESTORED BY THE CONTRACTOR IN ACCORDANCE WITH THE REQUIREMENTS OF THE MUNICIPAL ENGINEER, COUNTY ENGINEER OR NJDOT AS APPLICABLE.
3. ADDITIONAL EASEMENTS NOT SHOWN ON THE PLANS MAY BE NECESSARY FOR THE PLACEMENT OF UTILITY STRUCTURES. IT IS THE RESPONSIBILITY OF THE CONTRACTOR TO VERIFY THE EXISTENCE OF ANY REQUIRED EASEMENT. PAULUS, SOKOLOWSKI, AND SARTOR ASSUMES NO LIABILITY FOR ANY OF THE EASEMENT INFORMATION SHOWN HEREIN. EASEMENTS SHOWN ON THESE PLANS ARE FOR SCHEMATIC PURPOSES AND MAY NOT REFLECT ALL EASEMENTS. ALL EASEMENT INFORMATION SHALL BE VERIFIED BY THE CONTRACTOR AND ALL EASEMENT LOCATIONS INDICATED IN THE FIELD BY SURVEY.
4. ALL NEW UTILITIES SHALL BE INSTALLED UNDERGROUND, EXCEPT WHERE OTHERWISE NOTED.
5. UTILITIES LOCATED WITHIN ROADWAYS SHALL BE CONSTRUCTED PRIOR TO THE CONSTRUCTION OF THE ROADWAYS.
6. THE CONTRACTOR SHALL REQUEST UTILITY MARKOUTS AT LEAST SEVENTY-TWO (72) HOURS PRIOR TO ANY SITE DISTURBANCE. CONTRACTOR MUST NOTIFY "NEW JERSEY ONE-CALL" (800-272-1000) PRIOR TO ANY EXCAVATION OR GRADING ACTIVITY.
7. ALL PROPOSED UTILITIES, PAVEMENT, AND STRUCTURES SHALL BE INSTALLED AFTER THE COMPLETION OF ALL REQUIRED GROUND IMPROVEMENTS DETERMINED TO BE ADEQUATE FOR THE INSTALLATION OF UTILITIES AND APPROVED BY THE RESIDENT GEOTECHNICAL ENGINEER.
8. CONTRACTOR SHALL MAINTAIN AND PROTECT ALL EXISTING SURFACE AND SUBSURFACE UTILITIES DURING CONSTRUCTION OPERATION ACTIVITIES.
9. GAS, ELECTRIC, TELEPHONE, WATER, AND CABLE TV LINES MAY BE DESIGNED AND INSTALLED BY THE RESPECTIVE UTILITY. THE EXACT LOCATION OF EACH MAIN SHALL BE COORDINATED BY THE OWNER/GENERAL CONTRACTOR AND SUBMITTED TO THE DESIGN ENGINEER FOR REVIEW PRIOR TO INSTALLATION. FINAL DESIGN OF TELEPHONE, ELECTRIC, CABLE AND GAS UTILITIES TO BE PROVIDED BY UTILITY COMPANIES.

HANDICAP ACCESSIBILITY NOTES

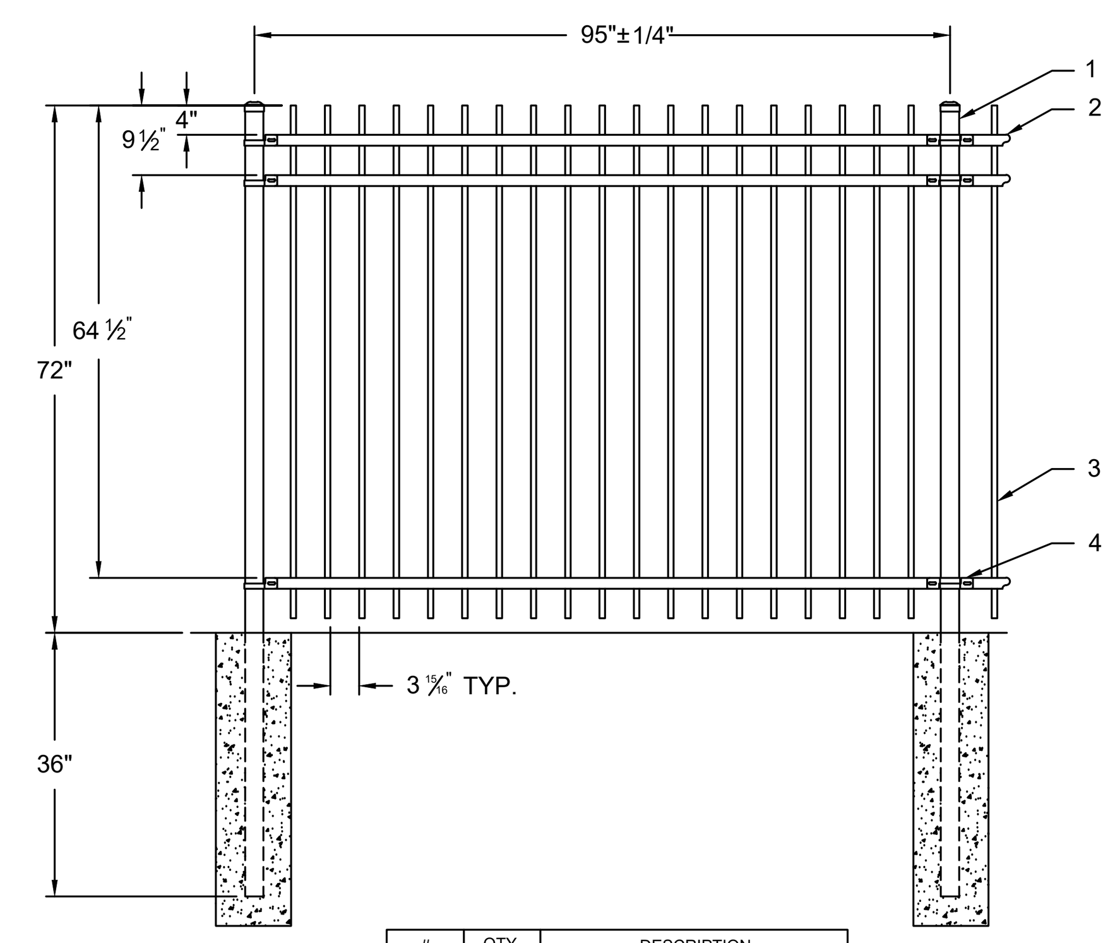
CONTRACTORS SHALL EXERCISE APPROPRIATE CARE AND PRECISION IN CONSTRUCTION OF HANDICAP (ADA, BARRIER FREE, ETC.) ACCESSIBLE COMPONENTS FOR THE SITE. THESE COMPONENTS (AS CONSTRUCTED) MUST COMPLY WITH THE CURRENT EDITION OF THE NJ UNIFORM CONSTRUCTION CODE SUBCHAPTER 7 BARRIER FREE ACCESS. FINISHED SURFACES ALONG THE ACCESSIBLE ROUTE OF TRAVEL FROM PARKING SPACES, PUBLIC TRANSPORTATION, PEDESTRIAN ACCESS AND INTER-BUILDING ACCESS, TO POINTS OF ACCESSIBLE BUILDING ENTRANCE/EGRESS, SHALL COMPLY WITH THE ADA CODE REQUIREMENTS. THESE INCLUDE, BUT ARE NOT LIMITED TO:

- PARKING SPACES AND PARKING AISLES - SLOPE SHALL NOT EXCEED 1:48 (¼" PER FOOT OR NOMINALLY 2.0%) IN ANY DIRECTION.
- CURB RAMPS - SLOPE SHALL NOT EXCEED 1:12 (8.3%) FOR A MAXIMUM OF SIX (6) FEET.
- LANDINGS - SHALL BE PROVIDED AT EACH END OF RAMPS, POSITIVE DRAINAGE SHALL BE PROVIDED, AND CROSS SLOPE SHALL NOT EXCEED 1:48 (¼" PER FOOT OR NOMINALLY 2.0%)
- PATH OF TRAVEL ALONG ACCESSIBLE ROUTE - SHALL PROVIDE A 36 INCH OR GREATER UNOBSTRUCTED WIDTH OF TRAVEL, (CAR OVERHANGS CANNOT REDUCE THIS MINIMUM WIDTH), THE SLOPE SHALL BE NO GREATER THAN 1:20 (5.0% OR ⅝" PER FOOT) IN THE DIRECTION OF TRAVEL, AND SHALL NOT EXCEED 1:48 (¼" PER FOOT OR NOMINALLY 2.0%) IN CROSS SLOPE. WHERE PATH OF TRAVEL WILL BE GREATER THAN 1:20 (5.0%), AN ADA RAMP WITH A MAXIMUM SLOPE OF 1:12 (8.3%), FOR A MAXIMUM DISTANCE OF 30 FEET, SHALL BE PROVIDED. THE RAMP SHALL HAVE ADA HAND RAILS AND "LEVEL" LANDINGS ON EACH END THAT ARE CROSS SLOPED NO MORE THAN 1:48 (¼" PER FOOT OR NOMINALLY 2.0%) FOR POSITIVE DRAINAGE.
- DOORWAYS - SHALL HAVE A "LEVEL" LANDING AREA ON THE EXTERIOR SIDE OF THE DOOR THAT IS SLOPED NO MORE THAN 1:48 (¼" PER FOOT OR NOMINALLY 2.0%) FOR POSITIVE DRAINAGE. THIS LANDING AREA SHALL BE NO LESS THAN 60 INCHES (5 FEET) LONG, EXCEPT WHERE OTHERWISE PERMITTED BY ADA STANDARDS FOR ALTERNATIVE DOORWAY OPENING CONDITIONS (SEE ICC/ANSI A117.1-2003 AND OTHER REFERENCES INCORPORATED BY CODE).

IT IS RECOMMENDED THAT THE CONTRACTOR REVIEW THE INTENDED CONSTRUCTION WITH THE LOCAL BUILDING CODE OFFICIAL PRIOR TO COMMENCING WORK TO VERIFY COMPLIANCE FOR ALL ADA COMPONENTS.

LANDSCAPING NOTES

1. ALL PLANT MATERIALS SHALL CONFORM TO THE AMERICAN ASSOCIATION OF NURSERYMEN STANDARDS AND SHALL BE FIRST QUALITY NURSERY GROWN STOCK, FREE FROM DISEASE OR OBJECTIONABLE DISFIGUREMENTS AND PLANTED IN CONFORMANCE WITH SOUND NURSERY PRACTICE AND APPLICABLE CITY STANDARDS.
2. ALL TREES (EXCEPT AS NOTED) SHALL BE BALLED AND BURLAPPED NURSERY-GROWN STOCK.
3. ALL PLANT MATERIALS AND LAWNS SHALL BE PLANTED WITHIN THE RECOMMENDED SEASONABLE TIME PERIODS AS PRESCRIBED BY ACCEPTED HORTICULTURAL PRACTICE. PLANT MATERIAL WITH FALL PLANTING HAZARDS SHALL BE HANDLED ACCORDINGLY.
4. A TEMPORARY FENCE, SUCH AS A SNOW FENCE, SHALL BE ERECTED AT THE PERIMETER OF THE DRIP-LINE OF ALL EXISTING VEGETATION INDICATED TO REMAIN PRIOR TO ANY EXCAVATION, CONSTRUCTION OR SITE WORK. THIS FENCE MAY BE REMOVED ONLY AT THE TIME OF COMPLETION OF ALL CONSTRUCTION AND FINAL GRADING.
5. EXISTING TREES TO BE RELOCATED SHALL BE HANDLED ACCORDING TO ACCEPTABLE HORTICULTURAL PRACTICE.
6. ALL DISTURBED AREAS NOT SHOWN AS PLANTED OR LAWN ARE TO BE TOPSOILED AND SEEDED OR RETURNED TO THEIR ORIGINAL STATE BEFORE DISTURBANCE AS DIRECTED BY THE CITY ENGINEER.
7. ALL AREAS NOT RELATED TO THE DEVELOPMENT SHALL REMAIN IN THEIR NATURAL STATE.
8. ADDITIONAL LANDSCAPING APPROVED BY THE CITY ENGINEER SHALL BE PROVIDED BY THE APPLICANT TO REPLACE ANY VEGETATION INADVERTENTLY REMOVED FROM OUTSIDE THE LIMIT OF DISTURBANCE LINE AS SHOWN ON THE APPROVED GRADING PLAN DURING CONSTRUCTION.
9. PROPOSED TREES SHALL NOT BE PLANTED WITHIN EASEMENTS, DRIVEWAYS AND SIGHT TRIANGLES. THEREFORE, THE TREE LOCATIONS SHOWN ARE APPROXIMATE AND SHALL BE ADJUSTED IN THE FIELD.
10. ALL SHADE TREES IN PEDESTRIAN WALK AREAS SHALL HAVE INITIAL LIMBS STARTING AT A MINIMUM OF SEVEN FEET ABOVE FINISHED GRADE.
11. ALL PLANTINGS ARE TO BE MULCHED WITH A THREE-INCH MINIMUM DEPTH OF SHREDDED HARDWOOD BARK.
12. PLANTS ARRANGED IN CONTINUOUS GROUPINGS SHALL BE SET IN MULCHED BEDS.
13. IF A DISCREPANCY EXISTS BETWEEN THE QUANTITY OF PLANTS SHOWN ON THE PLAN AND THE QUANTITY INDICATED ON THE LANDSCAPE SCHEDULE, THE DEVELOPER SHALL BE RESPONSIBLE FOR THE QUANTITIES SHOWN ON THE LANDSCAPE PLAN.
14. PROPOSALS FOR PLANT SUBSTITUTIONS (NECESSITATED BY THE LACK OF AVAILABILITY OF CERTAIN SPECIES) MAY BE CONSIDERED IF SPECIFICALLY BROUGHT TO THE ATTENTION OF THE CITY ENGINEER. ANY PLANT SUBSTITUTIONS SHALL BE SUBJECT TO THE TIMELY REVIEW AND APPROVAL OF THE CITY ENGINEER.
15. PLANTING DEBRIS SHALL BE REMOVED FROM THE PROPERTY.
16. PLANT MATERIALS ARE TO BE GUARANTEED FOR TWO YEARS BY THE DEVELOPER TO BE IN HEALTHY AND VIGOROUS CONDITION FROM THE DATE OF ACCEPTANCE. IT IS UNDERSTOOD THAT THE OWNER WILL PROVIDE ADEQUATE AND TIMELY CARE DURING THE GUARANTEE PERIOD TO THE HIGHEST HORTICULTURAL STANDARDS. THE OWNER MAY BE RESPONSIBLE FOR THE MAINTENANCE OF ALL PROPOSED PLANTINGS BY PROVIDING THE CORRECT METHODS OF WEEDING, SPRAYING, WATERING, PRUNING, AND FERTILIZING.
17. ANY LIVE TREE WHICH IS SUBSTANTIALLY DAMAGED AS A RESULT OF GRADING OR GENERAL CONSTRUCTION MUST BE REMOVED AND REPLACED WITH ANOTHER TREE OR TREES AS APPROVED BY THE CITY ENGINEER.
18. TREE REMOVAL FROM ANY SLOPE OR ENVIRONMENTALLY SENSITIVE AREA IS PROHIBITED IF IT WILL CONTRIBUTE, IN THE OPINION OF THE CITY ENGINEER, TO EXTRA RUNOFF OF SURFACE WATER ONTO ADJOINING PROPERTY AND EROSION AND SILTING, UNLESS OTHER MEANS APPROVED BY THE CITY ENGINEER ARE PROVIDED TO PREVENT RUNOFF AND EROSION.
19. NO HEALTHY TREE THAT IS SPECIAL BY VIRTUE OF HISTORY, UNUSUAL SIZE, OR AGE, OR OF A RARE SPECIES, SHALL BE REMOVED EXCEPT AS MAY BE REQUIRED FOR THE PROTECTION OF PUBLIC HEALTH, SAFETY OR WELFARE.
20. SELECTED EXISTING HEALTHY TREES SIX INCHES IN CALIPER OR LESS MEASURED FOUR FEET ABOVE THE GROUND SHALL BE RELOCATED ON-SITE UNDER THE DIRECTION AND APPROVAL OF THE CITY ENGINEER.
21. NEWLY INSTALLED PLANT MATERIAL SHALL BE WATERED AT THE TIME OF PLANTING. REGULAR WATERING SHALL BE PROVIDED TO ENSURE THE ESTABLISHMENT AND REGULAR GROWTH OF ALL PLANTS.

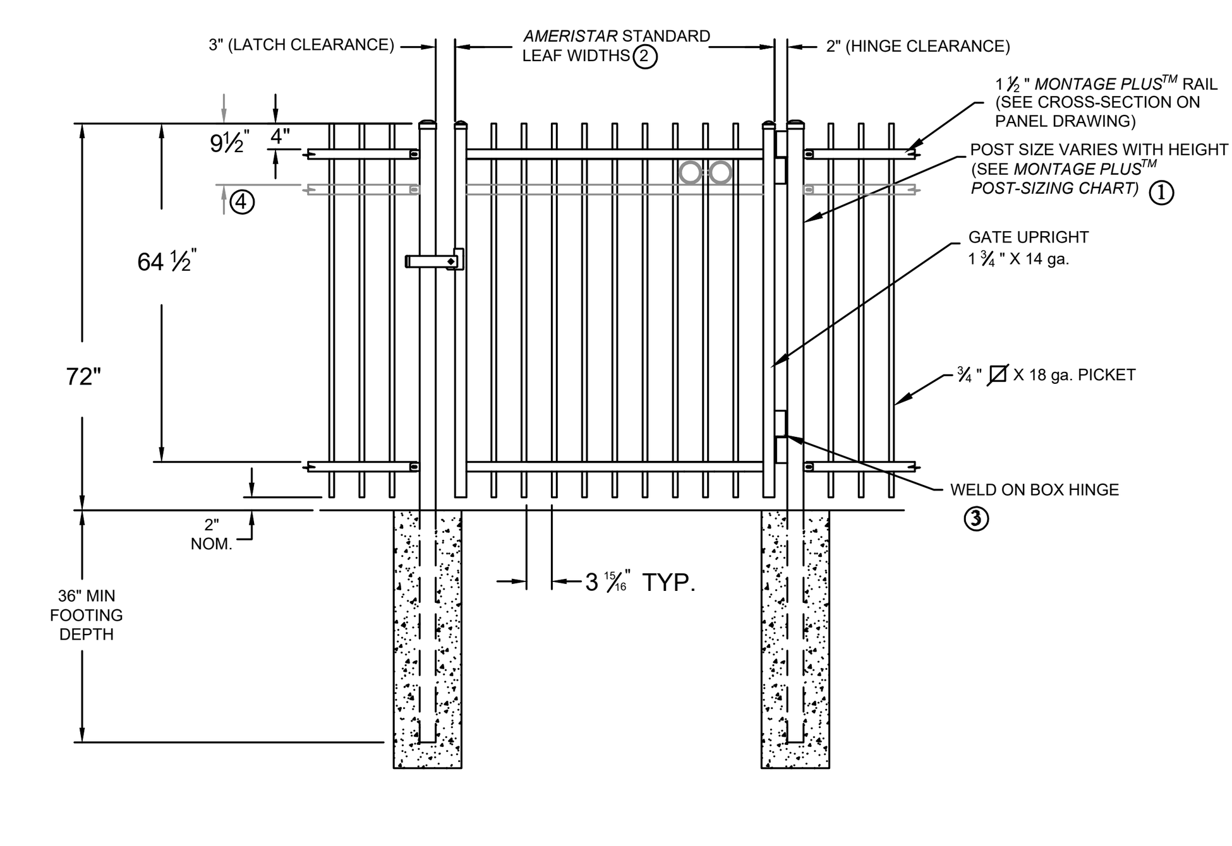


#	QTY.	DESCRIPTION
1	2	2½" Sq. POST
2	3	1½" x 1 7/16" RIBBED CHANNEL RAIL
3	19	¾" Sq. PICKET
4	6	BRACKETS

ORNAMENTAL 6' STEEL FENCE DETAIL

NOT TO SCALE

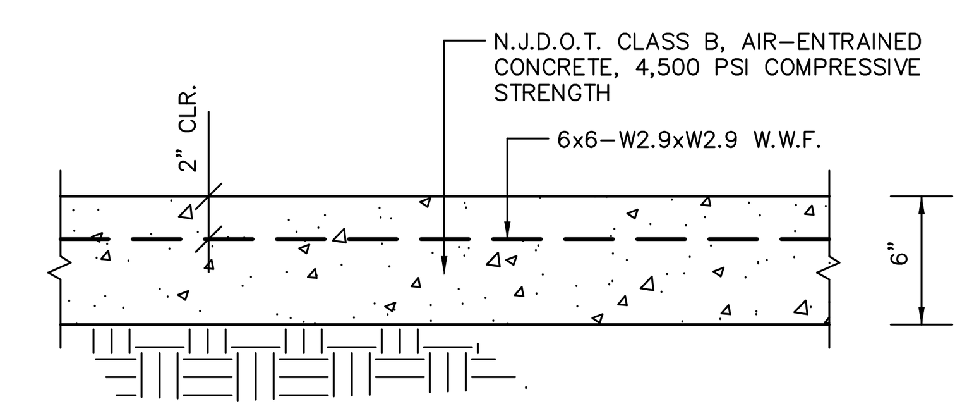
NOTES:
1. ALL FENCING AND GATES TO BE MANUFACTURED BY AMERISTAR, MONTAGE PLUS GENESIS MODEL OR APPROVED EQUAL.
2. ALL FENCE AND GATE POSTS FOOTINGS TO BE PLACED ON 8" MIN. FIRM BEARING.
3. ALL CONCRETE FOR FOOTINGS SHALL BE 4,500 PSI.
4. THIRD RAIL OPTION, BUT REQUIRED FOR DOUBLE RINGS.



ORNAMENTAL STEEL SWING GATE

NOT TO SCALE

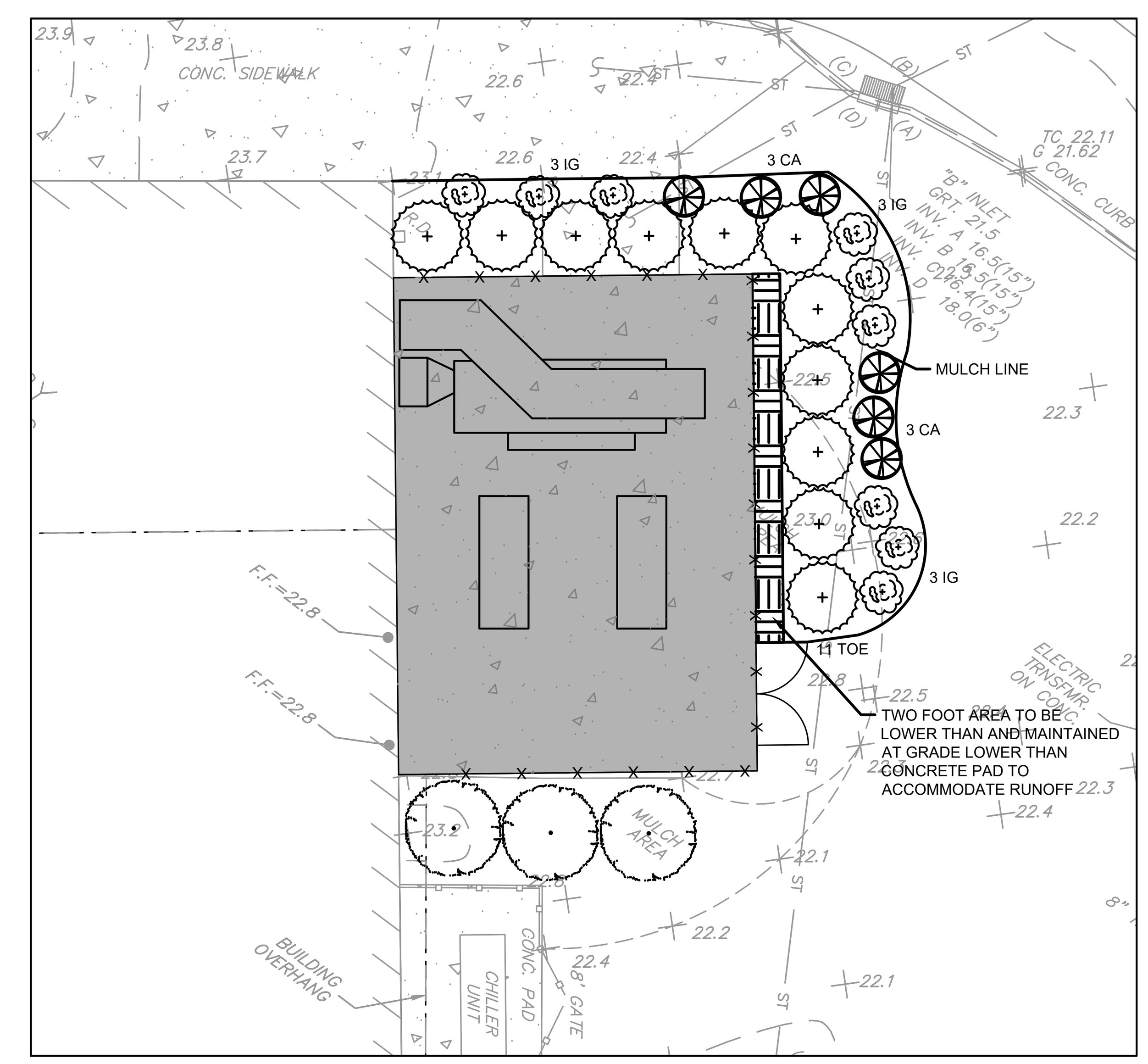
NOTES:
1. GATES TO BE MANUFACTURED BY AMERISTAR, MONTAGE PLUS GENESIS MODEL OR APPROVED EQUAL.
2. ALL CONCRETE FOOTINGS SHALL BE 4,500 PSI CONCRETE.
3. POST SIZE DEPENDS ON FENCE HEIGHT, WEIGHT AND WIND LOADS, SEE MONTAGE PLUS (TM) POST SIZING CHART.
4. SEE AMERISTAR GATE TABLE FOR STANDARD OUT TO OUT/LEAF WIDTHS.
5. ADDITIONAL STYLES OF GATE HARDWARE AVAILABLE UPON REQUEST.
6. THIRD RAIL OPTIONAL, BUT REQUIRED FOR DOUBLE RINGS.



NOTES:
1. CONCRETE TO BE CLASS B, AIR-ENTRAINED, HAVING 28 DAY COMPRESSIVE STRENGTH OF 4,500 PSI PER CURRENT N.J.D.O.T. STANDARD SPECIFICATIONS.
2. EXPOSED EDGES TO BE ROUNDED TO 1/2" RADIUS.

6" CONCRETE PAD DETAIL

NOT TO SCALE



LANDSCAPING PLAN

SCALE: 1" = 10'

LANDSCAPING SCHEDULE

QUANTITY	SYMBOL	BOTANICAL NAME	COMMON NAME	SIZE/COMMENTS
Evergreen Trees				
11	TOE	Thuja occidentalis 'Emerald Green'	Emerald Green Arborvitae	6' Ht./ B & B
Shrubs				
6	CA	Clethra alnifolia	Summersweet	36" Ht.
9	IG	Ilex Glabra 'Shamrock'	'Shamrock' Inkberry	36" Ht.
cont. = container		B & B = Balled and Burlapped	Ht. = Height	Sprd. = Spread

NOTE: GRASS COVER TO BE USED IN OPEN AREAS WHERE MULCH WAS REMOVED.

REV. / ISSUE	DATE	DESCRIPTION

CONSULTANT

ORIENTATION / KEY PLAN

CLIENT

Cooper University Health Care

PAULUS, SOKOLOWSKI AND SARTOR, LLC.
1415 ROUTE 70 EAST
SUITE 305
CHERRY HILL, NJ 08034
PHONE: (856) 335-6010
CERTIFICATE OF AUTHORIZATION NO. 24GA28032700

MATTHEW J. WALSH, P.E.
PROFESSIONAL ENGINEER
N.J. LIC. NO. 24GE05689100

SIGNATURE

PROJECT

COOPER UNIVERSITY HEALTH CARE

SHERIDAN PAVILION MRI & CT ALTERATIONS

BLOCK 1443, LOT 6
CITY OF CAMDEN, CAMDEN COUNTY, NEW JERSEY

SHEET TITLE

CONSTRUCTION DETAILS

PROJECT NO.: 04404.0032	DRAWN BY: MGK
SCALE: N.T.S.	CHECKED BY: MJW
DATE: 10/15/2025	SHEET 4 OF 4
SHEET NO. C-04	

PARKER McCAY

Parker McCay P.A.
9000 Midlantic Drive, Suite 300
P.O. Box 5054
Mount Laurel, New Jersey 08054-5054

P: 856.596.8900
F: 856.596.9631
www.parkermccay.com

Kevin D. Sheehan, Esquire
P: 856-985-4020
F: 856-552-1427
ksheehan@parkermccay.com

October 29, 2025

File No. 13978-76

VIA HAND DELIVERY
Ilene Lampitt, Esq., Director of Planning
Camden County Planning Board
Charles J. DePalma Public Works Complex
2311 Egg Harbor Road
Lindenwold, NJ 08021

Re: Cooper Health System
Block 1443, Lot 6
3 Cooper Plaza – Sheridan Pavillion
Letter of No Impact

Dear Ms. Lampitt:

This office represents the Cooper Health System ("Applicant") with the development of the above-referenced property located in the MS Zoning District. The Property is commonly known as 3 Cooper Plaza ("Property"). Applicant is proposing to place air handling units and a cooling system on the ground behind the Sheridan Pavillion on the Property. The Applicant will construct an approximately 26' x 36' pad and place the equipment on the pad. The existing door to the building near the new pad is no longer needed and will be sealed. The Applicant is seeking Minor Site Plan approval from the Camden City Planning Board for this project. The public hearing on the application will take place on November 17, 2025.

We are submitting herewith an application for a Letter of No Impact from the County Planning Board. In that regard, I enclose the following:

1. Two (2) copies of the Camden County Planning Board Application Form;
2. Two (2) sets of the Site Plan prepared by PS&S;
3. One (1) copy of an Aerial Map and Photo of the project location;
4. Two (2) copies of the Affidavit of Ownership;
5. One (1) copy of the County Submission Requirements form;

PARKER McCAY

6. One (1) copy of the County Fee Schedule;

7. A digital copy of only the Site Plan;

8. One (1) copy of the City Planning Board Application, and

9. Check in the amount of $200.00, representing the Letter of No Impact review fee.

Please review the application and advise as to whether you need any additional information to review this project.

Thank you for your cooperation. If you have any questions, please contact me.

Very truly yours,

KEVIN D. SHEEHAN

KDS/rr
Enclosures

cc: **ALL VIA EMAIL ONLY – WITH APPLICATION FORMS**
Jennifer O'Shea, Cooper Health System
Scott Payne, Cooper Health System
Katherine Huchinson, PS&S

4902-0913-2405, v. 1

CAMDEN COUNTY PLANNING BOARD APPLICATION

camden county

Making It Better, Together.

Application for County Approval of Subdivision, Site & Development Plans

Camden County Planning Board
Charles J. DePalma Public Works Complex
2311 Egg Harbor Road
Lindenwold, NJ 08021

Phone: 856.566.2978 Fax: 856.566.2988
E-mail: planningdivision@camdencounty.com

This application must be completed in full, duplicated, signed and filed with the municipality. Please also submit a copy of local application and approval. See County Submission requirement list for all documents necessary for a complete application.

(PLEASE TYPE OR PRINT LEGIBLY)

Project Information:

Project Name: The Cooper Health System

Project Address (if applicable) & Municipality: 3 Cooper Plaza - Sheridan Pavillion

Abuts County Road: _____ County Route No.: _____

Type of Submission (please check one):

- ◯ New Site Plan
- ◯ New Minor Subdivision
- ◯ New Major Subdivision
- ⊗ Request for Letter of No Impact or Waiver Review
- ◯ Revision to Prior Site Plan
  - Original Site Plan Application No.: _____ Date Originally Approved: _____
- ◯ Resubmission of Major Subdivision
  - Original Major Subdivision Application No.: _____ Date Originally Approved: _____

Tax Map Data:

Plate(s): _____

Block(s): 1443

Lot(s): 6

Existing Zoning: MS Zoning District

Variance(s) Required: No

The Camden County planning process concerns itself primarily with a review of factors that directly impact county facilities such as County owned roads and stormwater management systems. This application as well as Subdivision and Site Plan Procedures, Engineering and Planning Standards Vol. 1 & Development Regulations Vol. 2 can be found on the Camden County Planning Division website: https://www.camdencounty.com/service/public-works/planning/ . If you have any questions please call 856-566-2978.

CAMDEN COUNTY PLANNING BOARD APPLICATION

Applicant & Agent Contact Information (please type or print legibly or your application may be delayed):

Applicant: The Cooper Health System Phone: 856-382-6825 (Scott Payne) Fax: _____

Address: 1 Cooper Plaza Town & State: Camden, NJ

Email: payne-scott@cooperhealth.edu Zip.: 08103

Attorney: Kevin D. Sheehan, Esq. Phone: 856-985-4020 Fax: _____

Address: 2 Cooper Street, Suite 1901 Town & State: Camden, NJ

Email: ksheehan@parkermccay.com Zip.: 08102

Engineer: Katherine Hutchinson, PS&S Phone: 856-288-9623 Fax: _____

Address: 1415 Route 70 East, Suite 305 Town & State: Cherry Hill, NJ

Email: khutchison@psands.com Zip.: 08034

Proposed Use (please check all that apply):

Residential	Commercial	Industrial
◯ Single Family Detached	◯ Retail	◯ Maintenance/ Repair Shop
◯ Town Homes	◯ Office	◯ Flex Space
◯ Duplex	◯ Restaurant/ Food Establishment	◯ Storage/ Warehouse
◯ Apartments	◯ Hospitality/ Hotel Space	◯ Distribution Center
◯ Condominiums	ⓧ Medical Use	◯ Manufacturing
◯ Medical Care Residential	◯ Sports or Entertainment	◯ **Other**: _____

Project Description & Statistics:

Short Description of Project: Air Handling Unit and Cooling System on Ground.

Increase in Impervious Coverage?: (YES) / NO Total Increase or Decrease: 936 sf

Total Amount of Land Disturbed: 936 sf

Total Gross SF of all Buildings/ Development: No new buildings

Total New Residential Units: 0

Total New Jobs Created: 0

CAMDEN COUNTY PLANNING BOARD APPLICATION

Subdivision Description (if applicable):

Does this application include a lot consolidation? YES / NO **N/A**

Will new lots be created? YES / NO How Many New Lots? _____

Size of Existing Lot(s): _____

_____

_____

Portion to be Subdivided: _____

_____

_____

Municipal (applicant/agent must bring to municipality for signature)

Title of Municipal Official: Dr. Edward C. Williams

Authorized Municipal Signature: _____ Date: _____

Transmittal Date (if applicable): _____

Phone Number: 856-757-7214

Signatures Required:

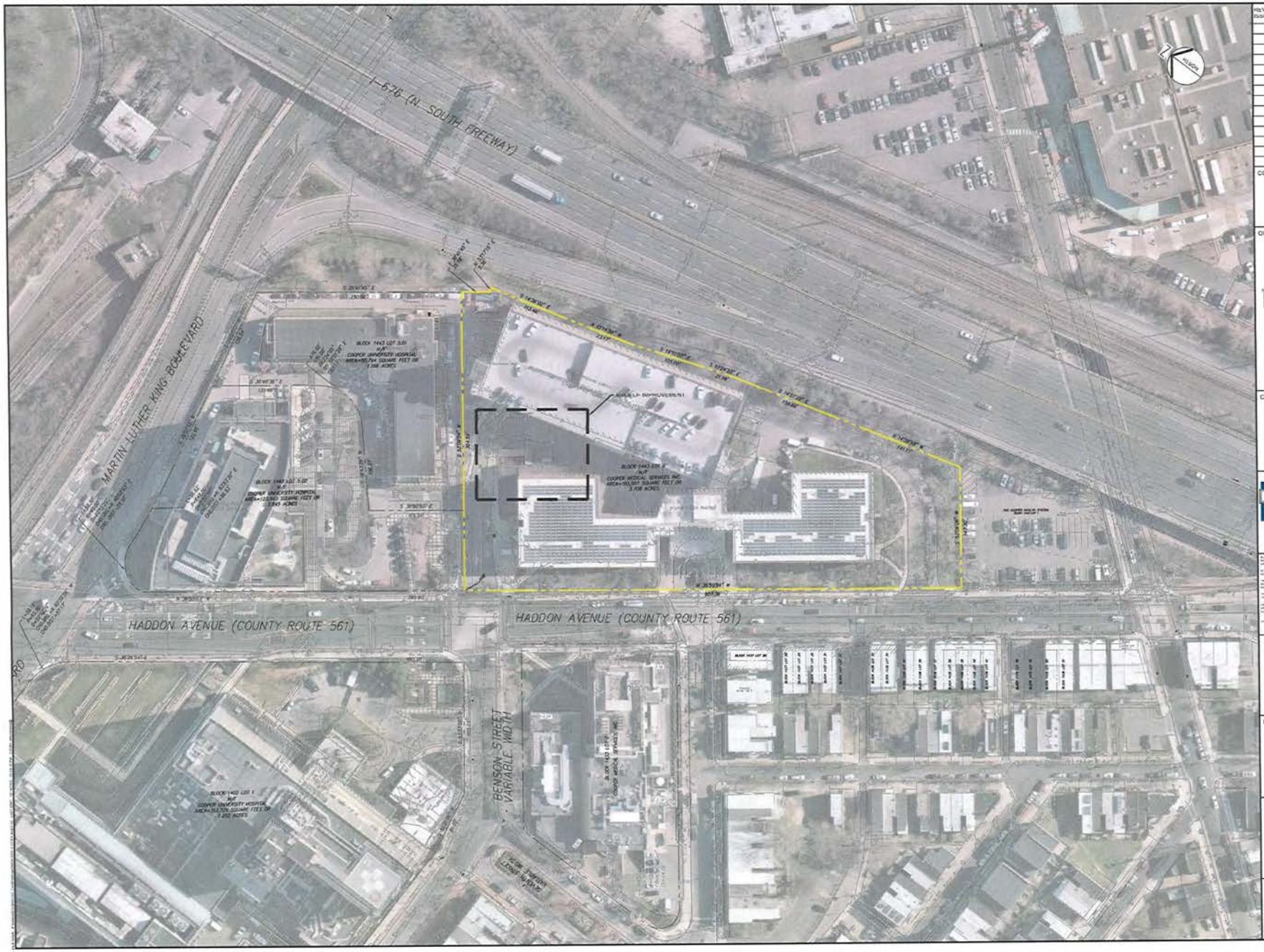
Name of Applicant: _____

Signature of Applicant: _____ Date: _____

Agent Completing Application: Kevin D. Sheehan, Attorney for Applicant

Signature of Agent: _____ Date: 10/29/25

For County Use:	*Stamp Date Received Below*
Classification of Application: _____	
Fees Included with Application: YES / NO	
County Plan Number: _____	



REV. / ISSUE	DATE	DESCRIPTION

CONSULTANT

ORIENTATION / KEY PLAN

GRAPHIC SCALE

(IN FEET)
1 inch = 50 ft.

CLIENT

Cooper University Health Care

PAGLIUS, SOKOLOWSKI AND SARTOR, LLC
1615 ROUTE 70 EAST
SUITE 305
CHERRY HILL, NJ 08034
PHONE: (856) 334-4010

MATTHEW J. WALSH, P.E.
PROFESSIONAL ENGINEER
N.J. LIC. NO. 24GE05689100

SIGNATURE

PROJECT

COOPER UNIVERSITY HEALTH CARE

SHERIDAN PAVILION MRI & CT ALTERATIONS

BLOCK 1443 LOT 6
CITY OF CAMDEN, CAMDEN COUNTY, NEW JERSEY

SHEET TITLE

OVERALL LOCATION PLAN

PROJECT NO.	04404.0032	DRAWN BY	MGK
SCALE	1" = 30'	CHECKED BY	MJW
DATE	10/15/2025	SHEET	2 OF 4

SHEET NO.

C-02

CAMDEN COUNTY PLANNING BOARD APPLICATION

AFFIDAVIT OF OWNERSHIP

camden county

Making It Better, Together.

Company/ Organization Information

Name of Company/Organization: The Cooper Health System

Is the Company a Corporation? YES / (NO)

If yes, what State is the Corporation incorporated in? _____

Is the Company a Partnership? YES / (NO)

Is Company an Individual Owner? YES / (NO)

Please list any/all individuals who are owners (*full/ part*) / (*individual/multiple*) of the Company/Organization.
If applicant is a Non-Profit Organization, please list all Board Members.

Name	Address	Title
Please see attached.		

I certify that the above information is true and correct to the best of my knowledge:

X _____ 10/29/25

Signature of Owner & Title ***Date***

Kevin D. Sheehan, Attorney for Applicant

X _____

Signature of Owner & Title ***Date***

CAMDEN COUNTY PLANNING BOARD APPLICATION
SUBMISSION REQUIREMENTS CHECKLIST
APPLICATION COVER PAGE

camden county
Making It Better, Together.

Documents must be submitted to the Planning Division Staff at least thirty (30) working days prior to the scheduled Planning Board meeting. No provisional approvals will be issued at Planning Board meeting.

Subdivision Requirements:

- ○ Two (2) Copies of the County Planning Board Application (Municipal use section must be filled out and bottom of this page must be signed)
- ○ One (1) Copy of Local Municipal Application
- ○ One (1) Copy of the Fee Schedule, Filled Out and Signed (Checks made payable to *Camden County Treasurer*)
- ○ Two (2) Sets of Plans
- ○ Two (2) Copies of the Affidavit of Ownership
- ○ One (1) Copy of Pinelands Certificate of Filing (If applicable)

Site Plan & Site Plan Revision Requirements

- ⊗ Two (2) Copies of the County Planning Board Application (Municipal use section must be filled out and bottom of this page must be signed)
- ⊗ One (1) Copy of Local Municipal Application
- ⊗ One (1) Copy of the Fee Schedule, Filled Out and Signed (Checks made payable to *Camden County Treasurer*)
- ⊗ Two (2) Sets of Plans of Signed and Sealed Plans (Only 24" by 36" Site plans will be accepted)

  (Plans must reflect all requirements contained in Subdivision and Site Plan Procedures, Engineering and Planning Standards Vol. 1 & Development Regulations Vol. 2)

N/A ○ Two (2) Copies of County Road Improvement Plans (If applicable and not included in Original Set of Plans)

W ○ Two (2) Copies of a Signed and Sealed Survey

(Conducted by a licensed surveyor if existing documents are referenced in accordance with NJAC 13:40-7.2 (a.)1)

W ○ Two (2) Sets of Drainage Calculations (Data based upon 10 YEAR-PRE & 25 YEAR-POST Year Storm Event)

W ○ Two (2) Sets of Traffic Impact Study (If available)

TO BE SUPPLIED ○ Two (2) Copies of the Local Engineer Report

⊗ Two (2) Copies of the Affidavit of Ownership

N/A ○ One (1) Copy of Pinelands Certificate of Filing (If applicable)

N/A ○ One (1) Copy of All Dedication, Easement, Deed, and Other Relevant Documents

Please Submit the Following Additional Items:

- ⊗ Map or Most Recent Aerial Photo of Site
- ⊗ Digital Copy of the Site Plan, Subdivision Plan or Major Subdivision

X _____
Certification of Completeness
Signature By Local Official

X _____
Signature of Agent or Applicant
Kevin D. Sheehan, Attorney for Applicant

CAMDEN COUNTY PLANNING BOARD APPLICATION
FEE SCHEDULE

camden county

Making It Better, Together.

Applicant's Name: The Cooper Health System

Project Name: 3 Cooper Plaza - Sheridan Pavillion Municipality: Camden

Project Address: 3 Cooper Plaza Plate: ____ Block: 1443 Lot: 6

Type of Plan

◯ Minor Subdivision (3 lots or less) ◯ Major Subdivision (4 lots or more) ⓧ Site Plan

Subdivision Fees

◯ Minor Review Fee ($200.00)..... $ _____

◯ Major Review Fee ($500.00) ..... $ _____

Site Plan and Subdivision Fees

◯ Design Review Fee ($500.00) site plan only ..... $ _____

◯ Total Parking Spaces ($8.00/Space) include any off street parking spaces for subdivisions and site palns..... $ _____

◯ Dwelling Units ($16.00/Unit) include in subdivisions and site plans ..... $ _____

◯ Dedication, Easement, Deed, Etc. Review Fee ($150.00) ..... $ _____

◯ Inspection Fee ($200.00) ..... $ _____

Additional/ Other Fees

◯ Preliminary / Concept Drawing Review Fee ($200.00)..... $ _____

◯ Site Plan Revision($200.00) ..... $ _____

ⓧ Request for Waiver Review/Letter of No Impact/ Exemptions ($200.00) ..... $ 200.00

◯ Signing of Filing Plats ($150.00)..... $ _____

Total $ 200.00

X _____ 10/29/25

Signature of Agent or Applicant *Date*

Kevin D. Sheehan, Attorney for Applicant

SPECIAL PROVISIONS

The Fee Schedule Check is Payable to the Camden County Treasurer. Fees paid are non-refundable once the review process begins.

*All Plans, Applications, Dedications, Easements, Deeds, etc. **MUST** be submitted to the Planning Board at Least Thirty (30) Working Days Prior to the Scheduled Planning Board Meeting. All Complete Plan and Application*

CITY OF CAMDEN
DEPARTMENT OF PLANNING & DEVELOPMENT

DIVISION OF PLANNING
&
ZONING

SITE PLAN APPLICATION AND
SUBMISSION ITEMS PACKAGE

Any question please contact:
Angela Miller, Planning Board Secretary
(856) 757-7214

SITE PLAN APPLICATION AND SUBMISSION ITEMS PACKAGE

TABLE OF CONTENTS

REVISED 8/27/2020

SITE PLAN APPLICATION
CHECKLIST

CHECK IF COMPLETED	**FOR OFFICE USE ONLY**
X 1. Zoning Application	____
X 2. Site Plan Applications & Site Plans (15 copies of both)	____
X 3. Proof of ownership (i.e. Deed, Tax Bill and/or Lease)	____
X 4. Signed Escrow Fee Agreement	____

PRIOR TO SUBMISSION OF ANY SITE PLAN APPLICATIONS EVERY APPLICANT MUST CALL FOR A PRE-APPLICATION CONFERENCE.

IT IS STRONGLY ADVISED THAT THE APPROPRIATE PROFESSIONALS BE PRESENT AT SAID MEETING.

PRE-APPLICATION CONFERENCE FEE: $500.00

(ACCORDING TO SECTION 577-270 OF THE CITY'S ZONING CODE)

***NOTE:**

A. **Incomplete applications will not be processed.**

B. **Submission hours are 8:30am to 4:30pm, Monday through Friday. All applications must be stamped "received" by the Division of Planning. No outside drop-offs will be processed.**

C. **All plans must be folded with *Title Block* facing upward.**

D. **Whenever public notice is required, the Division of Planning shall prepare procedures for said notification and advise applicant of its readiness.**

Revised 8/27/2020

The following checklist pertains to PLOT PLANS:

Check if Completed		For Office Use Only
X	1. Name and Address of owner and applicant	____
X	2. Name, signature, licenses #, seal and address of engineer, land surveyor, architect, professional planner, and/or landscape architect (as applicable).	____
X	3. Title block denoting type of application, tax map sheet, county municipality, block and lot, and street address.	____
X	4. Key map not less the 1" – 1000" showing location of tract to surrounding street, municipal boundaries, etc. within 500'.	____
X	5. Schedule for required and proposed zone requirements for Lot area, frontage, setbacks, imperious coverage, parking, etc.	____
X	6. North arrow to top of sheet, scale and graphic scale.	____
X	7. Signature block for board chair, secretary, zoning officer/ administrative officer and engineer.	____
X	8. Date of property ~~xxxxx~~ plan	____
X	9. Acreage of tract to nearest tenth	____
X	10. Date or original and all revisions	____
X	11. Size and location of existing or proposed structures and their dimension of setbacks	____
W	12. Location and dimensions of any existing or proposed streets	____
W	13. All proposed lot lines and area of lots in square feet	____
N/A	14. Copy of and plan delineation of any existing or proposed deed restriction	____
N/A	15. Any existing or proposed easement or land reserved or dedicated for public use	____
W	16. Existing streets, other right-of-way or easements; water courses, wetlands, soils floodplains, or other environmentally Sensitive area within 200' of tract	____
W	17. Topographical features of subject property from USGS 7.5 minute maps	____

CHECK IF COMPLETED		FOR OFFICE USE ONLY
W	18. Boundary, limits, nature and extent of wooded areas, Specimen trees and other significant physical features	____
W	19. Drainage calculations	____
W	20. Proposed utilities: sanitary sewer, water, storm water management, telephone, cable TV and electric	____
N/A	21. Soil erosion and sediment control plan if more than 5000 sq. ft.	____
W	22. Spot and finished elevations at all property corners, corners of Structures, existing or proposed first floor elevations	____
N/A	23. Construction details road and paving cross-sections and profiles if no profiles needed	____
N/A	24. Lighting plan and details Existing street lights to remain	____
W	25. Landscape plan and details	____
N/A	26. Site identification signs, traffic control signs, and directional signs	____
N/A	27. Sight triangles	____
N/A	28. Vehicular and pedestrian circulation patterns	____
N/A	29. Parking plan indicating spaces, size and type aisle width internal Collectors, curb cuts, drives and driveways and all ingress and Egress areas with dimensions	____
W	30. Preliminary architectural plan and elevations	____
W	31. Environmental impact report, parcels 2 acres or larger	____
W	32. Plan paper size should be 24 by 36	____

PURSUANT TO THE CODE OF THE CITY OF CAMDEN
(ARTICLE I, SECTION 233-4)

SITE PLAN APPLICATION

(Please Answer ALL Questions)

APPLICANT The Cooper Health System

ADDRESS 1 Cooper Plaza, Camden, NJ 08103

TELEPHONE# 856-382-6825 (Scott Payne)

OWNER OF PROPERTY Same
(if other than applicant)

ADDRESS

TELEPHONE

IF APPLICANT IS INCORPORATE OR A PARTNERSHIP, LEGAL REPRESENTATION IS REQUIRED. PLEASE PROVIDE THE FOLLOWING:

ATTORNEY'S NAME Kevin D. Sheehan, Parker McCay

ADDRESS 2 Cooper Street, Suite 1901, Camden, NJ 08102

TELEPHONE# 856-985-4020 FAX#

EMAIL ADDRESS ksheehan@parkermccay.com

PLEASE PROVIDE THE FOLLOWING INFORMATION BELOW:

ENGINEER AND/OR ARCHITECT NAME Katherine Hutchinson, PS&S

ADDRESS 1415 Route 70 East, Suite 305, Cherry Hill, NJ 08034

TELEPHONE# 856-288-9623 **FAX#**

ADDRESS OF DEVELOPMENT 3 Cooper Plaza, Camden, NJ 08103

BLOCK NO.(S) 1443 LOT NO.(S) 6 ZONE MS

PRESENT USE(S) Hospital Related Facility - Physician's Offices

DESCRIBE PROPOSED USES (S):
(attach separate sheet if needed) Air Handling Unit and Cooling System on Ground

SQUARE FOOTAGE OF PROPOSED USE 936 sq. ft.

LOT AREA (Measured in Square Footage)

BUILDING AREA OF GROUND FLOOR 936 sq. ft.

BUILDING AREA (Total Sq. Ft. – all floors) 936 sq. ft.

NO. OF PROPOSED PARKING SPACES 0

NO. OF EXISTING PARKING SPACES No Change

AREA IN ACRES OF ANY ADDITION ADJOINING LAND OWNED BY APPLICANT N/A

DOES THIS APPLICANT CONSTITUTE:
(Please check appropriate box)

_____ New Application ____ Site Plan Waiver

____ Preliminary X Preliminary and Final

____ Revision or Resubmission of a prior application

*IS THIS APPLICATION FOR A VARIANCE TO CONSTRUCT A MULTI-DWELLING OF 25 OR MORE FAMILY DWELLING UNITS? (Please check) YES _____ NO X

*IS THIS APPLICATION INTENDED FOR COMMERCIAL PURPOSE(S)?
(Please check) YES _____ NO X

IF THE ANSWER TO (A) OR (B) IS "YES", AND/OR IF APPLICANT IS A CORPORATION OR PARTNERSHIP, PLEASE PROVIDE THE FOLLOWING:

1. Name and address of all stockholders or individual partners owning at least 10% of its stock, of any class, or at least 10% of the interest in the partnership, as the case may be. (Additional sheet may be attached if needed).

NAME ADDRESS

See Attached

DOES THIS APPLICATION INCLUDE:

1. AN ADDITION OF 1,000 SQ. FT. OR MORE TO AN EXISTING STRUCTURE?
   (Please circle) (YES) NO

2. AN ADDITION OF 1,000 SQ. FT. OR MORE OF PAVING AREA FOR OFF-STREET PARKING?
   (Please circle) YES (NO)

THIS APPLICANT CERTIFIES THAT THE ABOVE INFORMATION HAS BEEN COMPLETED TO THE BEST OF HIS/HER KNOWLEDGE.

10/27/25
DATE

The Cooper Health System
APPLICANT'S NAME (PLEASE PRINT)

APPLICANT'S SIGNATURE

Kevin D. Sheehan, Attorney for Applicant