

Planning / Zoning Board

DEVELOPER CERTIFICATION

To be completed by ***developer and all associates who would be subject to disclosure pursuant to NJSA 40:55 -48.1 and NJSA 40:55-48.2***

DEVELOPER (name) _____

ADDRESS _____

PURSUANT TO MONROE TOWNSHIP MUNICIPAL ORDINANCE NO. 0-7-2008-018 _____

_____ (Name), of full age, does hereby certify as follows:

1. My name is _____, I hold the position of _____
at _____ (name business / professional entity).

2. I am familiar with the Monroe Township Ordinance No. 0-7-2008-018, Establishing Chapter 24 Entitled "Code of Ethical Conduct" which is annexed hereto and made a part hereof. All reportable political contributions under the Ordinance are disclosed on the attached Schedule A which is made a part of this certification.

3. On behalf of _____ (name of business / professional entity), I hereby certify that we are in compliance with the Municipal Ordinance No. 0-7-2008-018.

4. We further acknowledge that we have a continuing duty to report any political contribution under this Ordinance which may occur during the pendency period of the application (until approval or denial by the Board).

I certify that the forgoing statements made by me are true. I understand that if any of the foregoing statements made by me is willfully false, I am subject to punishment.

(Name, Title)

Date: _____

SCHEDULE A

Political Contribution Disclosure Form for:
Developer

<u>Date of Contribution</u>	<u>Recipient</u>	<u>Amount</u>
1.	_____	_____
2.	_____	_____
3.	_____	_____
4.	_____	_____
5.	_____	_____
6.	_____	_____
7.	_____	_____
8.	_____	_____
9.	_____	_____
10.	_____	_____
11.	_____	_____

Attach additional sheet if necessary.

Planning/Zoning Board

PROFESSIONAL'S CERTIFICATION (Business)

To be completed by ***Applicant's Professional on Behalf of their Business***

Professional's Business or Professional Entity Name: _____

Applicant (name): _____

PURSUANT TO MONROE TOWNSHIP MUNICIPAL ORDINANCE NO. 0-7-2008-018

_____ (name), of full age, does hereby certify as follows:

1. My name is _____, I hold the position of _____ at _____ (name of business/professional entity)
2. I am familiar with the Monroe Township Ordinance No. 0-7-2008-018, establishing Chapter 24 entitled "Code of Ethical Conduct" which is annexed hereto and made part hereof. All reportable political contributions under the Ordinance are disclosed on the attached Schedule A which is made a part of this certification.
3. On behalf of _____ (name of business/ professional entity), I hereby certify that we are in compliance with the Monroe Township ordinance No. 0-7-2008-018.
4. We further acknowledge that we have a continuing duty to report any political contribution under this Ordinance which may occur during the pendency period of the application (until approval or denial by the Board).

I certify that the foregoing statements made by me are true. I understand that if any of the forgoing statements made by me are willfully false, I may be subject to punishment.

(Name, Title)

Date: _____

SCHEDULE A

Political Contribution Disclosure Form for:
PROFESSIONAL'S CERTIFICATION (Business)

<u>Date of Contribution</u>	<u>Recipient</u>	<u>Amount</u>
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		
11.		

Attach additional sheet if necessary.

Planning/Zoning Board

PROFESSIONAL'S CERTIFICATION (Self)

To be completed by **Applicant's Professional (Personal)**

Professional (name): _____

Applicant (name): _____

PURSUANT TO MONROE TOWNSHIP MUNICIPAL ORDINANCE NO. 0-7-2008-018

_____ (name), of full age, does hereby certify as follows:

- 5. My name is _____, I hold the position of _____ at _____ (name of business/professional entity)
- 6. I am familiar with the Monroe Township Ordinance No. 0-7-2008-018, establishing Chapter 24 entitled "Code of Ethical Conduct" which is annexed hereto and made part hereof. All reportable political contributions under the Ordinance are disclosed on the attached Schedule A which is made a part of this certification.
- 7. I hereby certify that I am in compliance with the Monroe Township ordinance No. 0-7-2008-018.
- 8. I further acknowledge that I have a continuing duty to report any political contribution under this Ordinance which may occur during the pendency period of the application (until approval or denial by the Board).

I certify that the foregoing statements made by me are true. I understand that if any of the forgoing statements made by me are willfully false, I may be subject to punishment.

(Name, Title)

Date: _____

SCHEDULE A

Political Contribution Disclosure Form for:
PROFESSIONAL'S CERTIFICATION (Self)

<u>Date of Contribution</u>	<u>Recipient</u>	<u>Amount</u>
1.	_____	_____
2.	_____	_____
3.	_____	_____
4.	_____	_____
5.	_____	_____
6.	_____	_____
7.	_____	_____
8.	_____	_____
9.	_____	_____
10.	_____	_____
11.	_____	_____

Attach additional sheet if necessary.

Planning / Zoning Board

OWNER CERTIFICATION

To be completed by **Owner**

NAME OF OWNER _____

ADDRESS _____

APPLICANT (name) _____

PURSUANT TO MONROE TOWNSHIP MUNICIPAL ORDINANCE NO. 0-7-2008-018 _____

_____ (Name), of full age, does hereby certify as follows:

1. My name is _____, I hold the position of _____
at _____ (name of business).

2. I am familiar with the Monroe Township Ordinance No. 0-7-2008-018, Establishing Chapter 24 Entitled "Code of Ethical Conduct" which is annexed hereto and made a part hereof. All reportable political contributions under the Ordinance are disclosed on the attached Schedule A which is made a part of this certification.

3. On behalf of _____ (name of business / professional entity), I hereby certify that we are in compliance with the Municipal Ordinance No. 0-7-2008-018.

4. We further acknowledge that we have a continuing duty to report any political contribution under this Ordinance which may occur during the pendency period of the application (until approval or denial by the Board).

I certify that the forgoing statements made by me are true. I understand that if any of the foregoing statements made by me is willfully false, I am subject to punishment.

(Name, Title)

Date: _____

SCHEDULE A

Political Contribution Disclosure Form for:
Owner

<u>Date of Contribution</u>	<u>Recipient</u>	<u>Amount</u>
1.	_____	_____
2.	_____	_____
3.	_____	_____
4.	_____	_____
5.	_____	_____
6.	_____	_____
7.	_____	_____
8.	_____	_____
9.	_____	_____
10.	_____	_____
11.	_____	_____

Attach additional sheet if necessary.

CERTIFICATION OF DEVELOPER ASSOCIATES

To be completed by **Stockholder or Partner of Firm/Corp.**
Owning at least 10% or more pursuant to NJSA 40:55D-48.1 and
NJSA 40:55D-48.2

NAME OF FIRM _____

ADDRESS _____

NAME OF INDIVIDUAL STOCKHOLDER OR PARTNER _____

APPLICANT (name) _____

PURSUANT TO MONROE TOWNSHIP MUNICIPAL ORDINANCE NO. 0-7-2008-018 _____

_____ (Name), of full age, does hereby certify as follows:

1. My name is _____, I hold the position of _____

at _____ (name of business).

2. I am familiar with the Monroe Township Ordinance No. 0-7-2008-018, Establishing Chapter 24 Entitled "Code of Ethical Conduct" which is annexed hereto and made a part hereof. All reportable political contributions under the Ordinance are disclosed on the attached Schedule A which is made a part of this certification.

3. On behalf of _____ (name of business / professional entity), I hereby certify that we are in compliance with the Municipal Ordinance No. 0-7-2008-018.

4. We further acknowledge that we have a continuing duty to report any political contribution under this Ordinance which may occur during the pendency period of the application (until approval or denial by the Board).

I certify that the forgoing statements made by me are true. I understand that if any of the foregoing statements made by me is willfully false, I am subject to punishment.

(Name, Title)

Date: _____

SCHEDULE A

Political Contribution Disclosure Form for:
Stockholder or Partner Owning at least 10% or more

<u>Date of Contribution</u>	<u>Recipient</u>	<u>Amount</u>
1.	_____	_____
2.	_____	_____
3.	_____	_____
4.	_____	_____
5.	_____	_____
6.	_____	_____
7.	_____	_____
8.	_____	_____
9.	_____	_____
10.	_____	_____
11.	_____	_____

Attach additional sheet if necessary.