



TOWNSHIP OF MONROE
COUNTY OF GLOUCESTER
COMMUNITY DEVELOPMENT DEPARTMENT

SITE PLAN APPLICATION

FOR OFFICIAL USE ONLY

APPLICATION FILED: _____

FEE PAID: _____

ESCROW ACCOUNT #: _____

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SECTION I: TYPE OF APPLICATION & VARIANCE REQUIREMENT

Minor-Preliminary _____ Minor-Final _____ Waiver of a Formal Site Plan X
**Major-Preliminary _____ ** Major-Final _____

Is a Variance required for this application? Yes _____ No X
If yes, complete separate Variance Application.

SECTION II: GENERAL INFORMATION

A. Applicant:
Name: Inspira Health Network, Inc.
Address: 165 Bridgeton Pike, Mullica Hill, NJ 08062
Email: _____ Telephone #: 856-641-6600

B. The Applicant is a: Corporation X Partnership _____ Individual _____
Other (Please specify) Non-Profit New Jersey Corporation

C. If the Applicant is a corporation or a partnership, please attach a list of the names and addresses of persons having a 10% interest or more in the corporation or partnership. Non-Profit

D. The relationship of the Applicant to the property in question is: Owner _____
Lessee X Purchaser Under Contract _____ Other (Please Specify) _____

E. Owner:
Name: Williamstown Associates LP c/o RD Management LLC
Address: 810 Seventh Avenue, New York, NY 10019
Email: rbirdoff@rdmanagement.com Telephone #: 212-265-6600

F. Engineer/Surveyor:
Name: David J. Fleming, PE - Marathon Engineering & Environmental Services, Inc.
Address: 3 Kildeer Court, Suite 302, Swedesboro, NJ 08085
Email: dave.fleming@marathonconsultants.com Telephone #: (856) 241-9709