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**ORIGINAL**

June 30, 2026

File No.: 30998-1

**VIA E-MAIL AND HAND DELIVERY**

Honorable Chairman and Planning Board Members  
**c/o Anne-Marie Hellman, Clerk of the Board**  
Florence Township Planning Board  
Township of Florence  
711 Broad Street  
Florence, NJ 08518

**RECEIVED**

**JUN 30 2026**

**PB2026/04**

**Re: 2043 Route 130 S, Florence, NJ  
Block 159, Lot 5.02**

Dear Ms. Hellman:

This office represents LFB LLC ("Applicant") with regard to the above-referenced property. In that regard, I enclose the following:

- 1) Original and fourteen (15) copies of the Land Use Application;
- 2) One Original (1) Escrow Agreement;
- 3) One (1) copy of the 200 foot certified property owner list;
- 4) One (1) copy of the tax certifications;
- 5) Fifteen (15) copies of the Floor Plan;
- 6) Fifteen (15) copies of the Site Plan; and
- 7) Two (2) checks in the amount of:
  - a. \$250.00 representing the application fee; and
  - b. \$1,250.00 representing the escrow fee

We will provide the Security Plan and Odor and Noise Mitigation Plan under separate cover.

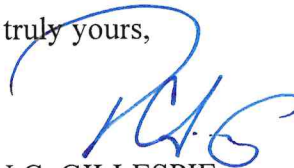
**COUNSEL WHEN IT MATTERS.<sup>SM</sup>**

Mount Laurel, New Jersey | Hamilton, New Jersey | Camden, New Jersey

Kindly advise whether the Applicant's Conditional Use and Site Plan Waiver will be scheduled for consideration at the next available meeting of the Planning Board of the Township of Florence. Should the Board require anything further at this time, please contact me.

Thank you for your continued assistance and cooperation in this matter.

Very truly yours,



JOHN C. GILLESPIE

JCG/jth

Encl.

**VIA E-MAIL ONLY:**

cc: John Dunne  
Fergal Conefrey  
Antonio Cartolano  
Caroline O Sullivan  
Nicholas Mastrogiannis  
Steve DellaSalla

# TOWNSHIP OF FLORENCE

## VARIANCE APPLICATIONS

### CHECKLIST OF SUBMISSION REQUIREMENTS

**TO BE FILLED OUT BY APPLICANT:**

Name of Applicant: LFB LLC

Location of Subject Property:

Street Address: 2043 Route 130 S

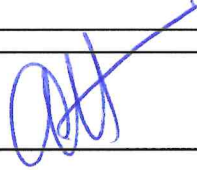
Block: 159 Lot: 5.02

Date Submitted to Florence Land Use Office: \_\_\_\_\_

RECEIVED

**FOR OFFICIAL USE ONLY:**

JUN 30 2026

Date Received at Florence Land Use Office: \_\_\_\_\_ By: 

PB2026/04

Completeness Review By (required by both):

| Complete | Incomplete | Reviewed by    | Signature | Date Reviewed |
|----------|------------|----------------|-----------|---------------|
| _____    |            | Board Engineer | _____     | _____         |
|          |            | Board Attorney | _____     | _____         |

(If incomplete indicate the missing items on this form and return it to the applicant)

Date Returned to Applicant: \_\_\_\_\_ By: \_\_\_\_\_

### INSTRUCTIONS

You should first obtain the "GENERAL INSTRUCTIONS FOR APPLICATIONS", from the Land Use Office. Read it carefully for a detailed explanation of the application process. Be sure that you have the correct checklist before you begin compiling your application. This checklist relates to steps 1 and 2 in the process (as described in the General Instructions) and can be used only for **variance applications**. It is your responsibility, as an applicant, to provide a complete "picture" of your application. Only after you have provided the information listed below can your application be certified as "complete" and submitted to the Planning Board or Zoning Board for their review. In some cases (indicated below), specific checklist items may be requested to be waived by checking the appropriate box under "waiver requested". Be sure that you address each of the items listed in this checklist in your application submission. Failure to do so will result in it being classified "incomplete". An "incomplete" application has no legal status.

### **SUBMISSION OF MATERIALS to the LAND USE OFFICE**

At the time of the original submission of your application to the Florence Land Use Office, your application must be in 14 complete sets (original and 13 copies). All maps must be folded and a complete set must be sent directly to the Board's professional staff (addresses can be obtained from the Land Use Office). As noted below, the application fee is a non-waivable submission item. However, because the application fee is non-refundable, you are not required to submit the application fee until after your application is certified "complete" (and scheduled on the Board's meeting agenda).

#### Non-waivable Submission Items

The following items must accompany all applications at the time of the original submission. They cannot be waived. Please check the appropriate box when provided:

|          |                                                                                                                                                 |
|----------|-------------------------------------------------------------------------------------------------------------------------------------------------|
| Provided |                                                                                                                                                 |
| x        | Completed and signed checklist together with written justification of waiver requests, if any. Original and thirteen (13) copies.               |
| x        | Application Form. Original and thirteen (13) copies, completed and notarized.                                                                   |
| x        | Escrow fee along with the completed escrow agreement (consult with the Land Use Office for the amount and to obtain agreement form).            |
| x        | Certification by the Township Tax Collector that all taxes on the subject property are paid to date. Original and thirteen (13) copies.         |
| x        | If the property is under agreement, either a copy of the agreement or a letter from the owner granting permission to seek application approval. |

PLEASE NOTE: The application fee is also a non-waivable submission item; but because it is non-refundable, you may submit it after your application is certified as "complete" and scheduled on a Board meeting agenda.

#### Submission Items

The following items are required by ordinance to be submitted with all variance applications. You may request that a specific item be waived by marking the appropriate "waiver requested" box and providing written justification for the request. A determination on any waiver request will be made based upon the written justification that must accompany any waiver request. Waivers will be granted only for good and sufficient reason and the request to waive a major item will substantially delay the process. Please check the appropriate boxes:

| Waiver   |           |                                                                                                                                                                                                                       |
|----------|-----------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Provided | Requested |                                                                                                                                                                                                                       |
|          |           | Survey of the property by a licensed New Jersey land surveyor showing boundaries and all existing structures. Original and thirteen (13) copies.                                                                      |
|          |           | A sketch plan outlining the location, nature and extent of any variances(s) requested. Original and thirteen (13) copies.                                                                                             |
| x        |           | A complete "Request for Certified List of Property Owners" form (obtain from Land Use Office).                                                                                                                        |
|          |           | A certificate from the Zoning Officer setting forth the reasons for the denial of the zoning permit. If you have retained an attorney or planner, they may provide the written description of the needed variance(s). |

N/A  
No Variance Requested

**APPLICANT'S NOTICE RESPONSIBILITIES**

As an applicant for variance approval you have the responsibility under state law to notify the public and surrounding property owners of the date of the public hearing and the nature of the application. This responsibility, however, can only be fulfilled after the application has been certified as "complete", placed on the Board's agenda and scheduled for public hearing by the Land Use Office. Detach and retain this sheet until after you have been notified that your application has been certified "complete" and public hearing date has been set. At that time it is your responsibility to perform the following:

- \* Provide notice of the public hearing by personal service or certified mail to all property owners within 200 feet of the subject property as listed on the certified list provided by the Land Use Office **no later than ten (10) days prior to the public hearing.** (A sample notice is available from the Land Use Office.) An affidavit of service (form available from the Land Use Office), together with the certified mail receipts, shall be provided to the Land Use Office prior to the public hearing.
- \* Arrange for publication of a notice of the public hearing to be published no later than ten (10) days prior to the public hearing in the Burlington County Times (proof of publication must be provided to the Land Use Office prior to the hearing date.)
- \* Additional parties must receive notice, by personal service or certified mail, in the following situations. If the property you are developing is:
  1. Within 200' of an adjoining municipality, you must notify the clerk of that municipality and the Burlington County Planning Board.
  2. Adjacent to an existing or proposed county road or to property owned by Burlington County, you must notify the Burlington County Planning Board.
  3. Adjacent to a State highway, you must notify the New Jersey Commissioner of Transportation.
  4. Larger than 150 acres or will have more than 500 dwelling units, you must notify the State Planning Commission.

If you have any question concerning this checklist or the application process, contact the Florence Township Land Use Office at (609) 499-2525.

**“d” (“USE”) VARIANCE (under C40:55D-70d) SUBMISSION REQUIREMENTS**

If your application is for or includes a “d” (use) variance the following information must be provided in addition to the submission items listed above:

| Provided | Waiver<br>Requested |                                                                                                                                          |
|----------|---------------------|------------------------------------------------------------------------------------------------------------------------------------------|
| x        |                     | A written statement describing and providing legal justification for the exact proposed use requested. Original and thirteen (13) copies |

**APPLICANT’S CERTIFICATION**

The undersigned (applicant) hereby acknowledges that the information contained herein is true and complete to the best of his/her knowledge.

Date: This \_\_\_\_\_ day of \_\_\_\_\_, 2\_\_\_\_

  
\_\_\_\_\_  
John C. Gillespie, Esq.  
Att’y for Applicant

RECEIVED

JUN 30 2026

PB2026/04

DATE OF SUBMISSION/APPLICATION NO.:

                     ZONING BOARD ✓ PLANNING BOARD

RECEIVED BY:                     

TOWNSHIP OF FLORENCE  
LAND DEVELOPMENT APPLICATION

If you are not familiar with the Florence Township Ordinance requirements please ask to see a member of the Planning/Zoning Staff prior to filling out the application.

A. BASIC INFORMATION

1. APPLICANT NAME: LFB LLC  
STREET ADDRESS: 633 3rd Avenue  
CITY: New York STATE: NY ZIP: 10017  
TELEPHONE:                       
EMAIL:                     

2. OWNER NAME: Florence Plaza LLC  
STREET ADDRESS: 41 BAYARD STREET  
CITY: NEW BRUNSWICK STATE: NJ ZIP: 08901  
TELEPHONE:                       
EMAIL:                     

3. If applicant is not owner, set forth in detail the nature and source of the legal beneficial right by which you can claim to submit this application.

4. TYPE OF APPLICATION: (check as many items as applicable)  
Starred (\*) application require a public hearing with notice and legal advertisement.

|                                                 |                                                                          |                                                            |
|-------------------------------------------------|--------------------------------------------------------------------------|------------------------------------------------------------|
| <input type="checkbox"/> Minor subdivision      | <input type="checkbox"/> Major Site Plan – Final                         | <input type="checkbox"/> Interpret zoning map or ordinance |
| <input type="checkbox"/> Major Sub-Prel*        | <input checked="" type="checkbox"/> Conditional Use*                     | <input type="checkbox"/> Bulk variances*                   |
| <input type="checkbox"/> Major Sub-Final        |                                                                          | <input type="checkbox"/> Use variances*                    |
| <input type="checkbox"/> Minor Site Plan*       |                                                                          | <input type="checkbox"/> Informal Review                   |
| <input type="checkbox"/> Major Site Plan-Prel.* | <input type="checkbox"/> Appeal of decision of an Administrative Officer | <input type="checkbox"/> Other                             |

NOTE: If a variance is requested in conjunction with this application the exact nature of the variance must be indicated on the application Form – SEE No. 15.

5. LIST OF INDIVIDUALS WHO PREPARED PLANS:

ARCHITECT

NAME: Larry D. Sechleer  
STREET: 11 Tybourne Court  
CITY: Medford STATE: NJ ZIP: 08055  
TELEPHONE: 609-654-1742  
EMAIL: dsarchitect@comcast.net

SITE PLANNER

NAME:                       
STREET:                       
CITY:                      STATE:                      ZIP:                       
TELEPHONE:                       
EMAIL:                     

ENGINEER

NAME:                       
STREET:                       
CITY:                      STATE:                      ZIP:                       
TELEPHONE:                       
FAX:                       
EMAIL:                     

ATTORNEY

NAME: John C. Gillespie, Esq., Parker McCay  
STREET: 9000 Midlantic Drive, Suite 300  
CITY: Mount Laurel STATE: NJ ZIP: 08054  
TELEPHONE: 856-985-4083  
FAX:                       
EMAIL: jgillespie@parkermccay.com

SITE INFORMATION

6. LOCATION OF PROPERTY

STREET ADDRESS 2043 Route 130 S, Florence Township  
BLOCK NO. 159 LOT NO: 5.02

7. TYPE OF ROAD FRONTAGE: ☒ Rt. 130 ☐ Collector ☐ Secondary Local Road  
☐ Arterial ☐ County Road ☐ Primary Local Road

8. ZONE DISTRICTS: (Circle one)

|                |                                                           |                          |
|----------------|-----------------------------------------------------------|--------------------------|
| R Residential  | AGR Agricultural                                          | GM General Manufacturing |
| RA Residential | <input checked="" type="checkbox"/> HC Highway Commercial | SM Special Manufacturing |
| RB Residential | NC Neighborhood Commercial                                | P Park                   |
| RC Residential | OP Office Park                                            | H Historic               |

9. DESCRIPTION OF PROPOSED USE

Present Use Truck parts supplier in strip mall

Proposed Use Class 5 Cannabis Retailer

Number of Lots N/a

| <u>Lot Size</u> | <u>Frontages</u> | <u>Square Feet</u> | <u>Acres</u> |
|-----------------|------------------|--------------------|--------------|
| Required        | _____            | _____              | _____        |
| Existing        | _____            | _____              | _____        |
| Proposed        | _____            | _____              | _____        |

Primary Building Setback Requirements

|          | <u>Front</u> | <u>One Side</u> | <u>Second Side</u> | <u>Rear</u> |
|----------|--------------|-----------------|--------------------|-------------|
| Required | _____        | _____           | _____              | _____       |
| Existing | _____        | _____           | _____              | _____       |
| Proposed | _____        | _____           | _____              | _____       |

Accessory building setback requirements (if applicable)

|          | <u>Side</u> | <u>Rear</u> | <u>No. of Parking Spaces &amp; Loading</u> | <u>Off Street</u> | <u>Loading</u> |
|----------|-------------|-------------|--------------------------------------------|-------------------|----------------|
| Required | _____       | _____       | _____                                      | _____             | _____          |
| Existing | _____       | _____       | _____                                      | _____             | _____          |
| Proposed | _____       | _____       | _____                                      | _____             | _____          |

| <u>Percent of Impervious Coverage</u> | <u>Gross Floor Area</u> | <u>Height</u> |
|---------------------------------------|-------------------------|---------------|
| Allowed _____                         | _____                   | _____         |
| Existing _____                        | _____                   | _____         |
| Proposed _____                        | _____                   | _____         |

10. UTILITIES

Public Water

Yes No

☒ Will this proposal require new water supply?  
☒ Is there an existing municipal water connection?  
☒ Can an existing connection service this proposal?  
☒ Are additional connections required?  
☐ Is the municipal water supply available?  
☐ Has application been made for municipal sewer conn.?  
☐ Date \_\_\_\_\_ No. of Connections \_\_\_\_\_

Well N/A

Yes No

\_\_\_\_\_ Is there an existing well?  
 \_\_\_\_\_ Can the existing system service this proposal?  
 \_\_\_\_\_ Is a new well proposed?  
 \_\_\_\_\_ Has application been made?  
 \_\_\_\_\_ Has application been approved or denied?  
 \_\_\_\_\_ Date \_\_\_\_\_

Municipal Sewer

Yes No

☒ Will the proposal require new sewerage lines?  
☒ Is there an existing Municipal sewer connection?  
☒ Can the existing connection service the proposal?  
☒ Are additional sewer connections required?  
☒ Is sewer capacity available?  
☐ Has application been made for municipal sewer conn.?  
☐ Has application been approved or denied?

On Site Sewerage Treatment N/A

Yes No

\_\_\_\_\_ Is there an existing septic system?  
 \_\_\_\_\_ Can the existing system service this proposal?  
 \_\_\_\_\_ Is a new system proposed?  
 \_\_\_\_\_ Type \_\_\_\_\_ conventional septic  
 \_\_\_\_\_ alternative sewer  
 \_\_\_\_\_ waterless covert w/gray water

|                 |                    |                                  |                |                                          |
|-----------------|--------------------|----------------------------------|----------------|------------------------------------------|
| <u>Gas</u>      | <u>Natural Gas</u> | _____ Existing<br>_____ Proposed | <u>Propane</u> | _____ Existing<br>_____ Proposed         |
| <u>Electric</u> |                    | _____ Existing<br>_____ Proposed |                | _____ Above Ground<br>_____ Below Ground |

11. OTHER APPROVALS REQUIRED AND DATE PLANS SUBMITTED

|                                                 | YES      | NO       | MONTH/DAY/YEAR |
|-------------------------------------------------|----------|----------|----------------|
| 1. New Jersey Dept. of Environmental Protection |          | <u>X</u> |                |
| 2. Burlington County Soil Conservation District |          | <u>X</u> |                |
| 3. Burlington County Planning Board             |          | <u>X</u> |                |
| 4. N.J. Department of Transportation            |          | <u>X</u> |                |
| 5. New Jersey Cannabis Regulatory Commission    | <u>X</u> |          |                |

SUBMISSION DATA

12. LIST OF MAPS, REPORTS AND OTHER MATERIALS ACCOMPANYING APPLICATION  
(attach supplemental sheet if necessary)

| QUANTITY | DESCRIPTION OF ITEMS | MONTH/DAY/YEAR |
|----------|----------------------|----------------|
|          |                      |                |
|          |                      |                |
|          |                      |                |
|          |                      |                |

13. SUPPLEMENTAL ITEMS (COMPLETE AS NECESSARY)

PREVIOUS APPLICATIONS OR ACTIVITY:

X NO         YES    IF YES                       
MONTH/DAY/YEAR

TYPE OF ACTION                           APPROVED      DISAPPROVED

14. DEED RESTRICTIONS OR COVENANTS AFFECTING THIS APPLICATION:      YES (attach copy if yes)  
X NO

15. ARGUMENTS FOR VARIANCE: (attach sheet if necessary)

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16. WAIVERS OF DEVELOPMENT STANDARDS AND/OR SUBMISSION REQUIREMENTS: (attach sheet if necessary)

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17. EXPERT WITNESSES FOR APPLICANT: (when applicable)

| NAME                        | TYPE OF TESTIMONY           |
|-----------------------------|-----------------------------|
| <u>Larry D. Sechleer</u>    | <u>Architecture</u>         |
| <u>                    </u> | <u>                    </u> |
| <u>                    </u> | <u>                    </u> |
| <u>                    </u> | <u>                    </u> |

18.

**AFFIDAVIT OF APPLICANT:**

State of ~~New Jersey~~ Pennsylvania  
County of Philadelphia:SS

\_\_\_\_\_ of full age, being duly sworn according to law, on oath deposes and says, that all of the above statements and the papers submitted herewith are true.

John Donne

Applicant to Sign Here

Sworn and subscribed before me  
this 29th day of June, 2026.

Cassandra L Bryant

Notarized remotely online using communication technology via Proof.

Commonwealth of Pennsylvania - Notary Seal  
Cassandra L Bryant, Notary Public  
Philadelphia County  
My commission expires February 23, 2028  
Commission Number 1443740

19.

**AFFIDAVIT OF OWNERSHIP:**

State of New Jersey  
County of \_\_\_\_\_:SS

\_\_\_\_\_ of full age, being duly sworn according to law, on oath deposes and says, that \_\_\_\_\_ the deponent resides at \_\_\_\_\_ in the \_\_\_\_\_ of \_\_\_\_\_ in the County of \_\_\_\_\_ and in the State of \_\_\_\_\_ that \_\_\_\_\_ is the owner of all that certain lot, piece of land situated, lying and being in the municipality aforesaid, and known and designated as number \_\_\_\_\_

Owner to Sign Here

Sworn and subscribed before me  
this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

20.

**AUTHORIZATION BY OWNER:** (If anyone other than above owner is making this application, the following authorization must be executed.)

To the Approving Board of the Township of Florence:

LFR LLC is hereby authorized to make the within application.

Dated 6/25/26

Owner to Sign Here

**CERTIFICATION**

Date \_\_\_\_\_  
I, \_\_\_\_\_, an authorized representative of which is a corporation, or partnership, applying to the Planning Board or Zoning Board of Adjustment of the Township of Florence for permission to subdivide a parcel of land into six (6) or more lots, or applying for a variance to construct a multiple dwelling of twenty-five (25) or more family units, or for the approval of a site to be used for commercial purposes, do hereby disclose, pursuant to the requirements of NJSA40:55D-48.1. The name and address of all stockholders or individual partners owning at least 10% of the interest in the partnership which are hereby listed as follows:

| Name  | Address |
|-------|---------|
| _____ | _____   |
| _____ | _____   |
| _____ | _____   |
| _____ | _____   |

If any of the above owners is a corporation or partnership, the applicant is required to disclose the name and address of each individual holding a 10% interest, or greater, in the named corporation or partnership which shall be divulged in the same format as the above pursuant to NJSA 40:55D-48.2)

\_\_\_\_\_ Title

18. AFFIDAVIT OF APPLICANT:

State of New Jersey

County of \_\_\_\_\_:SS

\_\_\_\_\_ of full age, being duly sworn according to law, on oath deposes and says, that all of the above statements and the papers submitted herewith are true.

\_\_\_\_\_  
Applicant to Sign Here

Sworn and subscribed before me  
this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

19. AFFIDAVIT OF OWNERSHIP:

State of New Jersey

County of \_\_\_\_\_:SS

\_\_\_\_\_ of full age, being duly sworn according to law, on oath deposes and says, that \_\_\_\_\_ the deponent resides at \_\_\_\_\_ in the \_\_\_\_\_ of \_\_\_\_\_ in the County of \_\_\_\_\_ and in the State of \_\_\_\_\_ that \_\_\_\_\_ is the owner of all that certain lot, piece of land situated, lying and being in the municipality aforesaid, and known and designated as number \_\_\_\_\_.

\_\_\_\_\_  
Owner to Sign Here

Sworn and subscribed before me  
this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

20. AUTHORIZATION BY OWNER: (If anyone other than above owner is making this application, the following authorization must be executed.)

To the Approving Board of the Township of Florence:

LFB LLC is hereby authorized to make the within application.

Dated 6/25/26

\_\_\_\_\_  
Owner to Sign Here

CERTIFICATION

Date \_\_\_\_\_

I, \_\_\_\_\_, an authorized representative of which is a corporation, or partnership, applying to the Planning Board or Zoning Board of Adjustment of the Township of Florence for permission to subdivide a parcel of land into six (6) or more lots, or applying for a variance to construct a multiple dwelling of twenty-five (25) or more family units, or for the approval of a site to be used for commercial purposes, do hereby disclose, pursuant to the requirements of NJSA40:55D-48.1. The name and address of all stockholders or individual partners owning at least 10% of the interest in the partnership which are hereby listed as follows:

| Name  | Address |
|-------|---------|
| _____ | _____   |
| _____ | _____   |
| _____ | _____   |
| _____ | _____   |

If any of the above owners is a corporation or partnership, the applicant is required to disclose the name and address of each individual holding a 10% interest, or greater, in the named corporation or partnership which shall be divulged in the same format as the above pursuant to NJSA 40:55D-48.2)

\_\_\_\_\_  
Title

## TOWNSHIP OF FLORENCE

### LAND USE ESCROW AGREEMENT

#### FLORENCE TOWNSHIP PLANNING BOARD/ZONING BOARD OF ADJUSTMENT

This agreement, made this 30 day of June, 2026, by and between LFB LLC (hereinafter "Applicant"), and the Florence Township Planning Board/Zoning Board of Adjustment (hereinafter "Board").

**WHEREAS**, Applicant has filed with the Board an application for development of property located at 2043 Route 130 S, being Block/s 159, Lot/s 5.02 on the tax map of the Township of **Florence**, said application having been assigned the number PB#2026-04; ULE#2026-14

**WHEREAS**, in connection with the aforesaid application, Applicant has deposited with the Board, in escrow, the sum of \$ \_\_\_\_\_ (Check Number \_\_\_\_\_ Cash \_\_\_\_\_) as required by ordinance and/or rules of the Board to pay the anticipated cost of professional review of the aforesaid application by the Board's professional staff; and

**WHEREAS**, the parties desire to set forth their rights and obligations concerning the aforesaid escrow deposit, any additional deposits that may be required, and any refunds that may be due, in connection with the aforesaid application;

**NOW THEREFORE**, the parties hereto agree as follows:

1) **PURPOSE OF ESCROW DEPOSIT.** The purpose of the escrow deposit is to provide funds to pay the Board's solicitor, engineers, planner and other professionals (as may be deemed advisable or necessary by the Board in order to make informed decisions) for the actual time spent by them in reviewing the application in order to advise the Board whether the application is complete, whether it complies with ordinance requirements, whether changes or conditions should be imposed and whether the application meets requirements for approval. The funds are provided to pay for all professional review services of whatever nature, including but not limited to site inspections, written or oral communications with the applicant and with the Board and its

**Florence Township  
Planning Board/Zoning Board of Adjustment  
Escrow Agreement  
Page 2 of 3**

staff, attendance at conferences, research and study of particular problems, and preparation of official documents, including resolutions of approval or denial. The amount specified by ordinance to be deposited by Applicant in escrow is acknowledged by the Applicant to be an estimate only. The Applicant accepts its responsibility to pay the actual costs of professional review of the aforesaid application and agrees that such responsibility may require an additional deposit of funds, or may result in a refund of unused funds.

2) **PROFESSIONAL REVIEW.** The Board and the Applicant authorize the Board's professional staff to review, inspect, study and evaluate all plans, documents, and data which the aforesaid application comprises, to consult with the Applicant or any matter concerning the application, to research any laws and regulations that may apply to the proposed development, to physically inspect and view the property being developed, and to perform all tasks required or deemed advisable by them to enable them in their professional judgment to properly advise the Board. The Board directs its professional staff to make oral and/or written reports of their findings and conclusions derived from the foregoing review, study and investigation, and to submit bills to the Board on a monthly basis itemizing the services performed, the time spent in performing such services, and the approved rate applicable to such services. Applicant agrees to pay for the performances of the professional work outlined above, as required by the **Florence Township Land Use Office.**

3) **ADDITIONAL ESCROW DEPOSITS.** In the event that the amounts billed to the Board for professional review services shall exceed the amount of Applicant's escrow deposit, the Board shall notify Applicant in writing to deposit the full amount of such excess. Applicant shall, within ten (10) days from receipt of such notice, deposit additional funds with the Board sufficient to cover the amount of the foregoing deficit. The written notice described in this paragraph shall be sent to Applicant at the address given on the application form, unless Applicant notified the Board in writing that a different address shall be used. In the event that Applicant fails to timely deposit the additional funds in accordance with the notice given by the Board, the Board may cease further consideration of the application, may deny the action sought by the Applicant, and/or may avail itself of any legal remedy it has against the Applicant.

**Florence Township  
Planning Board/Zoning Board of Adjustment  
Escrow Agreement  
Page 3 of 3**

4) **REFUND OF ESCROW DEPOSITS.** In the event that the amounts billed to the Board for professional review services shall be less than the amount of Applicant's escrow deposit, the Board shall return such excess funds to the Applicant in accord with the escrow closeout procedures of the Municipal Land Use Law, N.J.S.A. 40:55D-53.2.

5) **BOARD'S CUSTODIAL OBLIGATIONS.** The Board shall keep the escrow deposits of Applicant on deposit in a depository institution selected by the Board. The Board shall comply with the reporting, interest and administrative expense requirements of N.J.S.A.40:55D-53.1, but only as to escrow deposits in excess of \$5,000.00. The Board shall disburse funds from Applicant's escrow deposit/s in accordance with its established procedures, including signed vouchers, for the payment of professional review fees.

6) **LITIGATION.** The Applicant shall be responsible for all expenses incurred by the Board as a result of litigation arising out of the non-performance by the Applicant of this escrow agreement, including but not limited to all costs and expenses of collection.

**IN WITNESS WHEREOF**, the Applicant and Board, by their duly authorized representative(s), have set their hands and seals as of the date first written above.

Witness as to Applicant:

\_\_\_\_\_

LFB LLC  
PRINT NAME OF APPLICANT

[Signature]  
**SIGNATURE** Of Applicant **OR**  
Representative

John Dunne  
Title of Representative

Witness as to Board:

\_\_\_\_\_

FLORENCETOWNSHIP  
PLANNING/ZONING BOARDS

BY: [Signature]  
Anne-Marie Hellmann, Board Clerk



**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](http://www.parkermccay.com)

**John C. Gillespie, Esquire**  
**Of Counsel**  
P: 856 985-4083  
F: 856 489-6980  
[jgillespie@parkermccay.com](mailto:jgillespie@parkermccay.com)

June 9, 2026

File No.: 30998-1

**VIA E-MAIL AND REGULAR MAIL**

Justin L. Lamicella, Sr., Tax Assessor  
Township of Florence  
Florence Township Municipal Building  
711 Broad Street  
Florence, NJ 08518

**RECEIVED**

**JUN 30 2026**

**PB2026/04**

**Re: CoGrow MassGP LLC, 2043 Route 130 South, Florence, NJ 08518**  
**Block 159, Lot 5.02**

Dear Mr. Lamicella:

This office represents CoGrow MassGP LLC with regard to a Land Use Application. Pursuant to the Municipal Land Use Law, kindly provide me with a certified list of property owners located within 200 feet of the above-referenced property. I enclose herewith our check in the amount of \$10.00 representing the fee for this service. Kindly provide the list via e-mail to: [jgillespie@parkermccay.com](mailto:jgillespie@parkermccay.com) and regular mail in the stamped, self-addressed envelope provided.

Thanking you for your courtesies, I remain,

Very truly yours,

JOHN C. GILLESPIE

JCG:jth

Encl.

**VIA E-MAIL ONLY:**

cc: John Dunne, Member  
Antonio Cartolano, Director of Acquisitions and Development  
Caroline O'Sullivan

4927-3018-2579, v. 1

**COUNSEL WHEN IT MATTERS.<sup>SM</sup>**

Mount Laurel, New Jersey | Hamilton, New Jersey | Camden, New Jersey

**TOWNSHIP OF FLORENCE  
OFFICE OF THE PLANNING BOARD AND  
ZONING BOARD OF ADJUSTMENT**

**REQUEST FOR CERTIFIED LIST OF PROPERTY OWNERS**

I hereby request a Certified List of Property Owners within two hundred feet (200') of the property located at 2043 Route 130 South  
and known as Block/s 159, Lot/s 5.02,  
as shown on the tax map of the Township of Florence, County of Burlington, State of New Jersey.

2043 Route 130 South

LOCATION OF PROPERTY (STREET ADDRESS AND NAME OF TOWN)

Property Owner: Florence Plaza LLC, 41 Bayard Street, New Brunswick, NJ 08901

NAME OF APPLICANT (PROPERTY OWNER), TELEPHONE NUMBER, & EMAIL

CoGrow MassGP LLC, 633 Third Ave., 17th Floor, New York, NY 10017

NAME OF APPLICANT, ADDRESS, TELEPHONE NUMBER, & EMAIL **(IF OTHER THAN THE PROPERTY OWNER)**

FEE PAID (CASH) (CHECK)

PLANNING BOARD

ZONING BOARD

**PLEASE NOTE:** A separate fee of \$10.00 for each block and lot is required and should be submitted under Step #1 of the application process.

RECEIVED

JUN 30 2026

PB2026/04

PARKER MCCAY

ATTORNEYS AT LAW

P.O. BOX 5054

9000 MIDLANTIC DR., #300  
MOUNT LAUREL, NJ 08054



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95306

PAY:

*Ten and 00/100 Dollars*

**Florence Township**

TO THE  
ORDER  
OF

NUMBER  
000095306

DATE  
06/09/2026

AMOUNT  
\*\*\*\*\*10.00



CLIENT DISBURSEMENT ACCOUNT  
VOID AFTER 6 MONTHS

AUTHORIZED SIGNATURE

⑈095306⑈ ⑆031201360⑆ 786923380⑈

Security Features Included



Details on back

**TOWNSHIP OF FLORENCE  
OFFICE OF THE PLANNING AND ZONING BOARDS**

**TAX COLLECTOR'S CERTIFICATION**

**RECEIVED**

**JUN 30 2026**

**PB2026/04**

Applicant's Name, Address, Telephone Number & Email: \_\_\_\_\_

CoGrow MassGP LLC, 633 Third Ave., 17th floor, New York, NY

Block/s: 159 Lot/s: 5.02

Street Address: 2043 Route 130 South

Property Owner's Name, Address, Telephone Number & Email **IF DIFFERENT FROM APPLICANT:**

Florence Plaza LLC, 41 Bayard Street, New Brunswick, NJ 08901

Tax Collector Use Only:

I HEREBY CERTIFY THAT:

( ) There is due to the Township of Florence, on the above property, the following amounts:

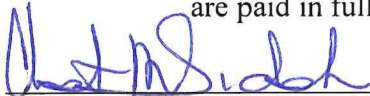
Taxes: \$                     

Assessments: \$                     

Water and/or Sewer Charges: \$                     

TOTAL: \$                     

( X ) ALL Taxes, Assessments and Water and/or Sewer Charges on the above property are paid in full.



Christine, M. Swiderski, Tax Collector

Date: 6/18/2026

**PLEASE NOTE:** This document must be completed by the Tax Office BEFORE it is submitted with the application package.



**PARKER McCAY**

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

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**John C. Gillespie, Esquire**  
**Of Counsel**  
P: 856 985-4083  
F: 856 489-6980  
[jgillespie@parkermccay.com](mailto:jgillespie@parkermccay.com)

June 9, 2026

File No.: 30998-1

**VIA E-MAIL AND REGULAR MAIL**

Christine M. Swiderski, Tax Collector  
Township of Florence  
Florence Township Municipal Building  
711 Broad Street  
Florence, NJ 08518

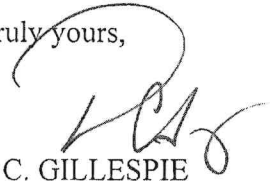
**Re: CoGrow MassGP LLC, 2043 Route 130 South, Florence, NJ 08518  
Block 159, Lot 5.02**

Dear Ms. Swiderski:

Our office represents CoGrow MassGP LLC with regard to an application for development of the above-referenced property. The Planning Board of the Township of Florence requires that a Certificate signed by the Tax Collector stating that taxes are paid accompany the development application. In that regard, it is kindly requested that the aforementioned Certificate be completed with a copy forwarded to Ms. Anne-Marie Hellman in the Planning Office to include in our application. Kindly provide the completed Certificate via e-mail to: [jgillespie@parkermccay.com](mailto:jgillespie@parkermccay.com) and regular mail in the stamped, self-addressed envelope provided.

Thanking you for your courtesies, I remain,

Very truly yours,



JOHN C. GILLESPIE

JCG/jth  
Encl.

**VIA E-MAIL ONLY:**

cc: John Dunne, Member  
Antonio Cartolano, Director of Acquisitions and Development  
Caroline O'Sullivan

4906-7982-3027, v. 1

COUNSEL WHEN IT MATTERS.<sup>SM</sup>

Mount Laurel, New Jersey | Hamilton, New Jersey | Camden, New Jersey

**TOWNSHIP OF FLORENCE  
OFFICE OF THE PLANNING AND ZONING BOARDS**

**TAX COLLECTOR'S CERTIFICATION**

Applicant's Name, Address, Telephone Number & Email: \_\_\_\_\_

CoGrow MassGP LLC, 633 Third Ave., 17th floor, New York, NY

Block/s: 159 Lot/s: 5.02

Street Address: 2043 Route 130 South

Property Owner's Name, Address, Telephone Number & Email **IF DIFFERENT FROM APPLICANT:**

Florence Plaza LLC, 41 Bayard Street, New Brunswick, NJ 08901

Tax Collector Use Only:  
I HEREBY CERTIFY THAT:

( ) There is due to the Township of Florence, on the above property, the following amounts:

Taxes: \$ \_\_\_\_\_

Assessments: \$ \_\_\_\_\_

Water and/or Sewer Charges: \$ \_\_\_\_\_

TOTAL: \$ \_\_\_\_\_

( ) ALL Taxes, Assessments and Water and/or Sewer Charges on the above property are paid in full.

Christine, M. Swiderski, Tax Collector

Date: \_\_\_\_\_

**PLEASE NOTE:** This document must be completed by the Tax Office BEFORE it is submitted with the application package.