

**2019 REQUEST FOR BUDGET APPROVAL OF
A SOLID WASTE COLLECTION DISTRICT**

MUNICIPALITY: Township of Allamuchy

COUNTY: Warren

<u>Rick Lomonaco</u>	<u>12/31/21</u>
Mayor's Name	Term Expires

Municipal Officials	
<u>Anne Marie Tracy</u>	<u>636</u>
Municipal Clerk	Cert. No.
<u>Donna Cummins</u>	<u>T8137</u>
Tax Collector	Cert. No.
<u>James Kozimor</u>	<u>N-0325</u>
Chief Financial Officer	Cert. No.
<u>William F. Schroeder</u>	<u>452</u>
Registered Municipal Accountant	Lic. No.
<u>John Ursin</u>	
Municipal Attorney	

Official Mailing Address of the Solid Waste Collection District

Township of Allamuchy

Box A

Allamuchy, New Jersey 07820

Phone #: (908) 852-5132
Fax #: (908) 852-0129

Governing Body Members	
<u>Name</u>	<u>Term Expires</u>
<u>Douglas Ochwat</u>	<u>12/31/2019</u>
<u>Manuel P. Quinoa</u>	<u>12/31/2019</u>
<u>James H. Cote</u>	<u>12/31/2020</u>
<u>Rosemary Tuohy</u>	<u>12/31/2020</u>

Pursuant to Public Law 2002, Chapter 126 - N.J.S.A. 40:66-10 is amended to read: "any municipality which operates a "Solid Waste Collection District" as of December 31, 1989, shall determine the amount of money necessary for the support of the solid waste collection district. The amount so determined shall become part of the municipal budget and subject to approval by the director."

Please attach this completed budget form to your 2019 Solid Waste Budget Resolution and mail to:

**Director, Division of Local Government Services
Department of Community Affairs
P.O. Box 803
Trenton, NJ 08625**

**New Jersey Department of Community Affairs
Division of Local Government Services**

**Budget Approval of a Solid Waste Collection District
(P.L. 2001, c. 126)**

1. Please describe the services provided by the Solid Waste Collection District (SWCD) (i.e. collection, disposal, tipping fees, etc.):

2. What percent of your municipality is serviced by the district? 25%

If you are requesting an expansion of the district, please provide a map showing the current district and the proposed expansion. Also explain the background, fiscal impact on the district's budget and reasons to expand the district (use additional sheets if necessary.)

N/A

3. If less than 10% of the municipality is in the district, what arrangements are made for the provision of trash removal to the balance of the municipality?

N/A

4. Are services provided by municipal employees or are they contractual? If, contractual, please state the name of the vendor, contract period, services provided and maximum contract amount.

Contractual

5. Do the employees of the District provide any other services in the municipality other than trash removal? If so, please explain.

N/A

**2019
SOLID WASTE COLLECTION DISTRICT**

Budget of the _____ Township of _____ Allamuchy _____, County of _____ Warren _____ for the Fiscal Year 2019

It is hereby certified that the Budget and Capital Budget annexed hereto and hereby made a part hereof is a true copy of the Budget and Capital Budget approved by resolution of the Governing Body on the

_____ 27th _____ day of _____ March _____, 2019

Anne Marie Tracy
Clerk

Box A

Address
Allamuchy, New Jersey 07820

Address
(908) 852-5132

Phone Number

Certified by me, this _____ 27th _____ day of _____ March _____, 2019

It is hereby certified that the approved Budget annexed hereto and hereby made a part is an exact copy of the original on file with the Clerk of the Governing Body, that all additions are correct, all statement contained herein are in proof and the total of anticipated revenues equals the total of appropriations.

Certified by me, this _____ 27th _____ day of _____ March _____, 2019

Certified by me, this _____ 27th _____ day of _____ March _____, 2019

William F. Schroeder of Nisivoccia LLP
Registered Municipal Accountant

Mount Arlington, NJ 07856
Address

200 Valley Road, Suite 300
Address

973-328-1825
Phone Number

James Kozimor
Chief Financial Officer

DO NOT USE THESE SPACES

CERTIFICATION OF ADOPTED BUDGET	<i>(Do not advertise this Certification form)</i>	CERTIFICATION OF APPROVED BUDGET
<p>It is hereby certified that the amount to be raised by taxation for local purposes has been compared with the approved Budget previously certified by me and any changes required as a condition to such approval have been made. The adopted budget is certified with respect to the foregoing only.</p> <p align="center">STATE OF NEW JERSEY Department of Community Affairs Director of the Division of Local Government Services</p> <p>Dated: _____ By: _____</p>		<p>It is hereby certified that the Approved Budget made part hereof complies with the requirements of law, and and approval is given pursuant to N.J.S.A. 40A:4-79.</p> <p align="center">STATE OF NEW JERSEY Department of Community Affairs Director of the Division of Local Government Services</p> <p>Dated: _____ By: _____</p>

COMMENTS OR CHANGES REQUIRED AS A CONDITION OF CERTIFICATION OF THE LOCAL FINANCE BOARD

The changes or comments which follow must be considered in connection with further action on this budget.

_____ Township _____ of Allamuchy County of Warren

MUNICIPAL BUDGET NOTICE

Section 1.

Municipal Budget of the Township of Allamuchy, County of Warren for the Fiscal Year 2019

Be it Resolved, that the following statements of revenues and appropriations shall constitute the Solid Waste Collection Budget for the year 2019;

Be it Further Resolved, that said Budget be published in the Star Gazette

in the issue of April 5th, 2019

The Governing Body of the Township of Allamuchy does hereby approve the following as the Budget for the year 2019.

			Abstained
RECORDED VOTE (Insert last name)	Ayes	Nays	
			Absent

Notice is hereby given that the Budget and the Tax Resolution was approved by the Governing Body of the Township

of Allamuchy, County of Warren, on March 27, 2019

A Hearing on the Budget and Tax Resolution will be held at The Municipal Building, on April 24, 2019 at

7:00 o'clock [Redacted] (P.M.) at which time and place objections to said Budget and Tax Resolution for the year 2019
(Cross out one)

may be presented by taxpayers or other interested persons.

EXPLANATORY STATEMENT

BUDGET MESSAGE

Sheet 3

NOTE:

MANDATORY MINIMUM BUDGET MESSAGE MUST INCLUDE THE FOLLOWING:

- 1. HOW THE 'LEVY CAP' WAS CALCULATED. (Explained in words what the "LEVY CAP" means and show the figures.)**
- 2. A SUMMARY BY FUNCTION OF THE APPROPRIATIONS THAT ARE SPREAD AMONG MORE THAN ONE OFFICIAL LINE ITEM**

SOLID WASTE COLLECTION DISTRICT BUDGET

APPROPRIATIONS FOR SOLID WASTE COLLECTION DISTRICT		Appropriated				Expended 2018	
		for 2019	for 2018	for 2018 By Emergency Appropriation	Total for 2018 As Modified By All Transfers	Paid or Charged	Reserved
Deferred Charges:				XXXXXXXXXXXX			XXXXXXXXXXXX
Emergency Authorizations				XXXXXXXXXXXX			XXXXXXXXXXXX
				XXXXXXXXXXXX			XXXXXXXXXXXX
				XXXXXXXXXXXX			XXXXXXXXXXXX
				XXXXXXXXXXXX			XXXXXXXXXXXX
				XXXXXXXXXXXX			XXXXXXXXXXXX
				XXXXXXXXXXXX			XXXXXXXXXXXX
STATUTORY EXPENDITURES:	XXXXXXXXXX	XXXXXXXXXXXX	XXXXXXXXXXXX	XXXXXXXXXXXX	XXXXXXXXXXXX	XXXXXXXXXXXX	XXXXXXXXXXXX
Contribution to:							
Public Employees' Retirement System							
Social Security System (O.A.S.I.)							
Unemployment Compensation Insurance (N.J.S.A. 43:21-3 et. seq.)							
Judgements							
Deficits in Operations in Prior Years				XXXXXXXXXXXX			XXXXXXXXXXXX
Surplus (General Budget)				XXXXXXXXXXXX			XXXXXXXXXXXX
TOTAL SOLID WASTE COLLECTION DISTRICT APPROPRIATIONS		81,825.00	75,528.00		75,528.00	75,528.00	