

FORM 'R'



Department of Building Housing and Land Use
410 East Railroad Avenue
Hackensack, NJ 07601
Ph: (201)646-3920 Fax: (201)646-8052

PROJECT FACT SHEET INFORMATION

Please provide the following information for the project which will be published on the City's Website.

1. Project address:
2. Estimated amount of total capital improvement:
3. Estimated month/year for Certificate of Occupancy:
4. Number of Units and Retail Spaces: Residential units:_____ Retail spaces:_____
5. Breakdown of Unit Count. One Bedroom:_____ Two Bedrooms: _____ Three Bedrooms:_____
6. Total Square Footage of Project: Average per residential unit: _____ Average retail space:_____
7. Parking: On Street:_____ Off Street:_____ PILOP (if applicable):_____
8. Designation: Redevelopment:_____ Rehabilitation:_____ (check if applicable). Date of Designation: _____
9. Date of Site Plan Approval:_____
10. Email rendering of project to adib@hackensack.org

This form must be submitted within 5 days of site plan approval.

Please send form and direct any questions to:

Albert H. Dib
Director of Redevelopment
adib@hackensack.org
201-646-3908