

# 2015 REQUEST FOR BUDGET APPROVAL OF A SOLID WASTE COLLECTION DISTRICT

MUNICIPALITY: Township of Aberdeen

COUNTY: Monmouth

<u>Holly Reycraft</u> Township Manager	<u>N/A</u> Term Expires
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Governing Body Members	
Name	Term Expires
Fred Tagliarini, Mayor _____	12/31/17 _____
Margaret Montone _____	12/31/17 _____
Joseph Martucci _____	12/31/17 _____
Greg Cannon _____	12/31/15 _____
Robert Swindle _____	12/31/15 _____
Connie Kelly _____	12/31/15 _____
Harvey Brenner _____	12/31/15 _____

Municipal Officials	
<u>Karen Ventura</u> Municipal Clerk	<u>C-1030</u> Cert No.
<u>Marie Taylor</u> Tax Collector	<u>T-1538</u> Cert No.
<u>Angela Morin</u> Chief Financial Officer	<u>N-0438</u> Cert No.
<u>Charles J. Fallon</u> Registered Municipal Accountant	<u>506</u> Lic No.
<u>Lee Cohen, Esq.</u> Municipal Attorney	

**Official Mailing Address of the Solid Waste Collection District**

Township of Aberdeen  
1 Aberdeen Sq.  
Aberdeen, NJ 07747  
 Fax #: .732-583-7204  
 Telephone #: 732-583-4200

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 2015 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? \_\_\_\_\_ 98% \_\_\_\_\_  
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.)
  
3. If less than 100% of the municipality is in the district, what arrangements are made for the provision of trash removal to the balance of the municipality?
  
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.
  
5. Do the employees of the District provide any other services in the municipality other than trash removal? If so, please explain.

# 2015 SOLID WASTE COLLECTION DISTRICT

Budget of the \_\_\_ Township \_\_\_\_\_ of \_\_\_\_\_ Aberdeen \_\_\_\_\_, County of \_\_\_ Monmouth \_\_\_\_\_ for the Fiscal Year 2015.

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

\_\_\_ 21st \_\_\_\_\_ day of \_\_\_\_\_ April \_\_\_\_\_, 2015.

Certified by me, this \_\_\_ 21st \_\_\_\_\_ day of \_\_\_ April \_\_\_\_\_, 2015

Karen Ventura \_\_\_\_\_

Clerk

One Aberdeen Square \_\_\_\_\_

Address

\_\_\_\_\_

Address

732-583-4200 \_\_\_\_\_

Phone Number

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 statements contained herein are in proof and the total of anticipated revenues equals the total of appropriations.

Certified by me, this \_\_\_ 21<sup>st</sup> \_\_\_\_\_ day of \_\_\_\_\_ April \_\_\_\_\_, 2015

Certified by me, this \_\_\_ 21st \_\_\_\_\_ day of \_\_\_ April \_\_\_\_\_, 2015

Charles Fallon \_\_\_\_\_

Registered Municipal Accountant

Hazlet, NJ 07730 \_\_\_\_\_

Address

Hwy 36 \_\_\_\_\_

Address

732-888-2070 \_\_\_\_\_

Phone Number

**Angela Morin** \_\_\_\_\_

Chief Financial Officer

**DO NOT USE THESE SPACES**

### CERTIFICATION OF ADOPTED BUDGET

*(Do not advertise this Certification form)*

### CERTIFICATION OF APPROVED BUDGET

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.

STATE OF NEW JERSEY  
Department of Community Affairs  
Director of the Division of Local Government Services

Dated: \_\_\_\_\_

By: \_\_\_\_\_

It is hereby certified that the Approved Budget made part hereof complies with the requirements of law, and approval is given pursuant to N.J.S. 40A:4-79.

STATE OF NEW JERSEY  
Department of Community Affairs  
Director of the Division of Local Government Services

Dated: \_\_\_\_\_

By: \_\_\_\_\_

**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.**

\_\_\_\_\_ of \_\_\_\_\_, County of \_\_\_\_\_

**SOLID WASTE COLLECTION DISTRICT RESOLUTION**

**Section 1.**

Solid Waste Collection District Budget of the \_\_Township\_\_ of \_\_Aberdeen\_\_\_\_\_, County of \_\_Monmouth\\_\_\_\_\_ for the Fiscal Year 2015

Be It Resolved, that the following statements of revenues and appropriations shall constitute the Solid Waste Collection District Budget for the year 2015;

Be It Further Resolved, that said Budget be published in the \_\_Asbury Park Press\_\_\_\_\_ in the issue of \_\_May 21st\_\_\_\_\_, 2015

The Governing Body of the \_\_Township\_\_\_\_\_ of \_\_\_\_\_Aberdeen\_\_\_\_\_ does hereby approve the following as the Budget for the year 2015:

**RECORDED VOTE**  
(Insert last name)

Ayes }

Nays }

Abstained }

Absent }

Notice is hereby given that the Budget and Tax Resolution was approved by the \_\_\_\_\_Governing Body\_\_\_\_\_ of the \_\_Township\_\_\_\_\_ of \_\_Aberdeen\_\_\_\_\_, County of \_\_Monmouth\_\_\_\_\_, on \_\_April 21st\_\_\_\_\_, 2015.

A Hearing on the Budget and Tax Resolution will be held at One Aberdeen Square\_\_\_\_\_, on \_\_June 4th\_\_\_\_\_, 2015 at

\_\_7:00\_\_ o'clock (P.M.) at which time and place objections to said Budget and Tax Resolution for the year 2015 may be presented by taxpayers or other interested persons.  
(Cross out one)

EXPLANATORY STATEMENT

**BUDGET MESSAGE**

**NOTE:**

**Sheet 3**

**MANDATORY MINIMUM BUDGET MESSAGE MUST INCLUDE A SUMMARY OF:**

- 1. HOW THE "LEVY CAP" WAS CALCULATED. (Explain 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 2014						
	for 2015		for 2014		for 2014 By Emergency Appropriation		Total for 2014 As Modified By All Transfers		Paid or Charged		Reserved		
<b>Deferred Charges:</b>						XXXXXXXXXX	XX					XXXXXXXXXX	XX
<b>Emergency Authorizations</b>						XXXXXXXXXX	XX					XXXXXXXXXX	XX
						XXXXXXXXXX	XX					XXXXXXXXXX	XX
						XXXXXXXXXX	XX					XXXXXXXXXX	XX
						XXXXXXXXXX	XX					XXXXXXXXXX	XX
						XXXXXXXXXX	XX					XXXXXXXXXX	XX
						XXXXXXXXXX	XX					XXXXXXXXXX	XX
<b>STATUTORY EXPENDITURES:</b>	XXXXXX	XXXXXXXXXX	XX	XXXXXXXXXX	XX	XXXXXXXXXX	XX	XXXXXXXXXX	XX	XXXXXXXXXX	XX	XXXXXXXXXX	XX
Contribution to:													
Public Employees' Retirement System		25,428	78	22,156	00			22,156	00	22,156	00		
Social Security System (O.A.S.I.)		30,000	00	28,692	00			28,692	00	27,234	16	1,457	84
Unemployment Compensation Insurance (N.J.S.A. 43:21-3 et. seq.)				2,500	00			2,500	00	2,500	00		
Judgements													
<b>Deficits in Operations in Prior Years</b>						XXXXXXXXXX	XX					XXXXXXXXXX	XX
<b>Surplus (General Budget)</b>		320,000		336,000	00	XXXXXXXXXX	XX	336,000	00	336,000	00	XXXXXXXXXX	XX
<b>TOTAL SOLID WASTE COLLECTION DISTRICT APPROPRIATIONS</b>		2,353,468	00	2,248,244	00			2,248,244	00	2,103,123	86	145,120	14

**SECTION 2 - UPON ADOPTION FOR YEAR 2015**

(Only to be Included in the Budget as Finally Adopted)

**RESOLUTION**

Be It Resolved by the \_\_\_\_\_ of the \_\_\_\_\_  
of \_\_\_\_\_, County of \_\_\_\_\_ that the budget hereinbefore set forth is hereby  
adopted and shall constitute an appropriation for the purposes stated of the sums therein set forth as appropriations, and authorization of the amount of:  
(a) \$ \_\_\_\_\_ (Item 2 below) for amount to be raised by taxation for Solid Waste Collection District.

<b>RECORDED VOTE</b> (Insert last name)	Ayes {	Nays {	Abstained {	Absent {
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**SUMMARY OF REVENUES and APPROPRIATIONS**

<b>1. General Revenues</b>		
Surplus Anticipated		
Miscellaneous Revenues Anticipated		
<b>2. AMOUNT TO BE RAISED BY TAXATION FOR SOLID WASTE COLLECTION DISTRICT</b>		
<b>TOTAL REVENUES</b>		
<b>3. General Appropriations</b>		
Operations		
Deferred Charges		
Statutory Expenditures		
Judgements		
Deficit in Operations in Prior Years		
Surplus (General Budget)		
<b>TOTAL APPROPRIATIONS</b>		

It is hereby certified that the within budget is a true copy of the budget finally adopted by resolution of the Governing Body on the \_\_\_\_\_ day of \_\_\_\_\_, 2015. It is further certified that each item of revenue and appropriation is set forth in the same amount and by the same title as appeared in the 2015 approved budget and all amendments thereto, if any, which have been previously approved by the Director of Local Government Services.

Certified by me this \_\_\_\_\_ day of \_\_\_\_\_, 2015 \_\_\_\_\_, Clerk.