

RULE ADOPTIONS

COMMUNITY AFFAIRS

(a)

DIVISION OF CODES AND STANDARDS

Notice of Administrative Correction

Uniform Construction Code

Rehabilitation Subcode

Materials and Methods

N.J.A.C. 5:23-6.8

Take notice the Department of Community Affairs discovered an error in N.J.A.C. 5:23-6.8. Effective November 7, 2011 (see 43 N.J.R. 1297(a) and 2999(a)), amendments were adopted throughout N.J.A.C. 5:23-6.8(b) to update references to the building subcode to reflect the adoption of the 2009 editions of the national model codes (see 43 N.J.R. 1298). In subparagraph (b)2v, the reference to "Sections 707.7, 707.8, 707.9, 707.10, 707.13.2" of the building subcode was amended as "Sections 708.7, 708.8, 708.9, 708.70, 708.13.2." However, the amended reference to Section 708.70, which does not exist in the 2009 International Building Code, was a typographic error appearing in the original notice of proposal; the correct updated reference for former Section 707.10 is Section 708.10. This notice of administrative correction is published pursuant to N.J.A.C. 1:30-2.7.

Full text of the corrected rule follows (addition indicated in boldface **thus**; deletion indicated in brackets [thus]):

5:23-6.8 Materials and methods

(a) (No change.)

(b) Building and Fire Protection Materials and Methods: The following sections of the building subcode (N.J.A.C. 5:23-3.14) shall constitute the building and fire protection materials and methods requirements for this subchapter:

1. (No change.)

2. The following sections of Chapter 7 entitled "Fire-Resistance-Rated Construction":

i.-iv. (No change.)

v. Sections 708.7, 708.8, 708.9, [708.70] **708.10**, 708.13.2;

vi.-xvii. (No change.)

3.-19. (No change.)

(c)-(l) (No change.)

(b)

NEW JERSEY HOUSING AND MORTGAGE FINANCE AGENCY

Notice of Administrative Changes

Maximum Attorney Services Fees

N.J.A.C. 5:80-31.3

Take notice that the New Jersey Housing and Mortgage Finance Agency, pursuant to N.J.A.C. 5:80-31.3(f), has determined the annual increase in the overall Consumer Price Index for New York-Northeastern New Jersey as published by the United States Department of Labor, Bureau of Labor Statistics as of September 30, 2013, to be 1.6 percent. Accordingly, the Agency is hereby changing, effective as of January 1, 2014, the maximum fees that can be paid from project funds for Agency-approved attorney services as set forth in N.J.A.C. 5:80-31.3(a).

Full text of the changed rule follows (additions indicated in boldface **thus**; deletions indicated in brackets [thus]):

5:80-31.3 Maximum fees

(a) The maximum fees that can be paid from project funds for Agency approved attorney services are as follows:

1. General legal matters . . . up to [\$187.00]**\$190.00**/hour;

2. Tenancy actions, as follows:

i. For each of the first two cases (requiring court appearance) on the same day . . . up to [\$149.00] **\$151.00**;

ii. For each additional case presented on the same day . . . up to [\$111.00] **\$113.00**; and

iii. For each case prepared for trial but resolved prior to actual court appearance . . . up to [\$75.00] **\$76.00**; and

3. General litigation, as follows:

i. Non-trial hours . . . up to [\$260.00]**\$264.00**/hour; and

ii. Trial hours . . . up to [\$299.00]**\$304.00**/hour.

(b)-(f) (No change.)

MILITARY AND VETERANS' AFFAIRS

(c)

OFFICE OF THE ADJUTANT GENERAL

DIVISION OF VETERANS' SERVICES

New Jersey Veterans' Transitional Housing Program (Veterans' Haven)

Readoption with Amendments: N.J.A.C. 5A:8

Adopted Repeals and New Rules: N.J.A.C. 5A:8 Appendices A and B

Proposed: June 17, 2013, at 45 N.J.R. 1469(a).

Adopted: October 3, 2013, by Brigadier General Michael L. Cunniff, the Adjutant General, Commissioner, Department of Military and Veterans' Affairs.

Filed: November 4, 2013, as R.2013 d.137, **without change**.

Authority: P.L. 1988, c. 444 and N.J.S.A. 38A:3-2.2, 38A:3-6.o and u, and 38A:3-6.4.

Effective Dates: November 4, 2013, Readoption; December 2, 2013, Amendments, Repeals, and New Rules.

Expiration Date: November 4, 2020.

Summary of Public Comment and Agency Response:

No comments were received.

Federal Standards Statement

A Federal standards analysis is not required for the rules readopted with amendments, repeals, and new rules. The only Federal requirements or standards that affect the subject of this rulemaking are found in OMB Circular A-133 and at 38 CFR 17.700 to 17.801.

OMB Circular A-133 governs the use of Federal grant money, and imposes reporting, application, and recordkeeping standards, with which Veterans' Haven is in compliance. The rules comply with and do not exceed this Federal standard.

38 CFR 17.700 to 17.801 govern the funding and administration of homeless veterans' programs. The rules are in compliance with and do not exceed this Federal standard.

Full text of the readopted rules can be found in the New Jersey Administrative Code at N.J.A.C. 5A:8.

Full text of the adopted amendments and new rules follows:

CHAPTER 8

NEW JERSEY VETERANS' TRANSITIONAL HOUSING PROGRAM
(VETERANS' HAVENS)

SUBCHAPTER 1. GENERAL PROVISIONS

5A:8-1.1 Purpose

This chapter establishes the rules governing the operations, personnel, admission, and discharge policies, and the general policies of the two New Jersey Veterans' Transitional Housing Programs (Veterans' Havens North and South or "the programs"). Veterans' Haven North is located on the grounds of the former Hagedorn Psychiatric Hospital in Lebanon Township (Hunterdon County), New Jersey. Veterans' Haven South is located on the grounds of the Ancora State Psychiatric Hospital in Winslow Township (Camden County), New Jersey. The programs are intended as transitional housing programs, with a semi-independent living component for homeless veterans.

SUBCHAPTER 2. DEFINITIONS

5A:8-2.1 Definitions

The following words and terms, as used in this chapter, shall have the following meanings unless the context clearly indicates otherwise:

...
 "Allowable deductions" means court-ordered payments, such as child support, wage garnishments, and fines, plus an individual's personal needs deduction of \$200.00 per month.

...
 "Gross monthly income" means all income and/or revenue received by a resident for a given month and includes, but is not limited to, funds received for labor or services, Social Security, pensions, VA compensation, aid and attendance, net rental income of property, and/or proceeds of business or enterprises and investments, not to include losses.

...
 "Resident contribution" means the monthly rental fee billed to the resident based upon 30 percent of the resident's net monthly income, less court-ordered payments and up to a \$200.00 deduction for personal needs. The resident contribution shall be no more than \$300.00 per month per resident.

"Residents' Liaison" means a resident who represents fellow residents on their issues and makes recommendations related to residents' rights and activities. The Resident Liaison is elected by current residents. The Resident Liaison must be a resident of at least six months, employed full time or in school full time, and follow all rules and regulations of the facility.

...

SUBCHAPTER 3. PROGRAM ADMISSION POLICY

5A:8-3.1 Admission eligibility criteria

(a) Persons eligible for admission to Veterans' Haven:

1.-4. (No change.)

5. Shall have been screened medically, to include a tuberculosis test, and psychiatrically by a USDVAMC and recommended by a USDVAMC as stabilized and qualified for admission to Veterans' Haven; and

6. Shall have medical and psychological needs that, in the determination of the Treatment Team, are capable of being addressed in a manner consistent with the social reintegration and employment goals, and within the reasonable and practical capabilities, of Veterans' Haven.

i. In making this determination, the Treatment Team shall consider the following factors:

(1)-(7) (No change.)

(8) The applicant's existing net monthly income shall not exceed \$1,800.

5A:8-3.2 Preapproval screening

(a)-(b) (No change.)

(c) During the preacceptance screening interview, the Treatment Team shall obtain from the applicant either the following information and documents, or the applicant's executed authorizations for the release of the following information and documents:

1.-4. (No change.)

5. Verification of funeral arrangements, if any are in place;

6. A copy of the applicant's advance directive for health care, if any, (the Treatment Team shall provide the applicant with information on how to execute an advance directive for health care, if requested to do so by the applicant), such as:

i.-iii. (No change.)

iv. A combined directive;

7. An application to New Jersey Veterans' Memorial Homes, if applicable;

8. An application to BG William C. Doyle Veterans Memorial Cemetery, if applicable; and

9. Verification of Veterans' Preference.

(d) (No change.)

SUBCHAPTER 4. PROGRAM DISCHARGE POLICY

5A:8-4.1 Discharge policy

(a)-(b) (No change.)

(c) A resident shall be involuntarily discharged for the following:

1. Use, possession, and/or distribution of alcohol or a controlled dangerous substance without a prescription, and/or the distribution of a prescribed controlled dangerous substance to another resident;

2.-10. (No change.)

(d) (No change.)

(e) Involuntarily discharged residents shall leave Veterans' Haven within eight hours. The Department will assist discharged residents in finding another program or accommodations at a shelter.

SUBCHAPTER 5. PROGRAM READMISSION POLICY

5A:8-5.1 Readmission guidelines

(a) A resident who has been either voluntarily or involuntarily discharged from Veterans' Haven who is eligible for admission pursuant to N.J.A.C. 5A:8-3.1 may be readmitted a maximum of three times to Veterans' Haven as determined by the Treatment Team on a case-by-case basis.

(b) (No change.)

SUBCHAPTER 6. MONTHLY RENTAL FEE

5A:8-6.1 General requirements for computing monthly rental fee

(a) (No change.)

(b) At the time of admission, and on the fifth day of each month thereafter, the computation of the monthly rental fee is calculated with the resident. The calculation shall be determined by the review of award letters from either USDVA or the Social Security Administration. Income from all sources shall be disclosed. Income shall be verified by submitting the most recent copy of the earnings statements, pay stubs, bank statements, and such other documents as may be required.

(c)-(d) (No change.)

APPENDIX A

NEW JERSEY DEPARTMENT OF MILITARY & VETERANS' AFFAIRS

VETERANS' HAVEN - SOUTH
PO Box 80
202 Spring Garden Road
Winslow, NJ 08096-0080
Phone: (609) 561-0269 FAX: (609) 561-7604

VETERANS' HAVEN - NORTH
200 Sanatorium Road,
Suite 101
Glen Gardner, NJ 08826
Phone: (908) 537-1999 FAX (908) 537-1990

RESIDENT CONTRACT

I agree to comply with all of the below stated items.

- 1. I accept the responsibility of observing the rules listed below and to totally devote myself to abiding by all aspects of my treatment plan devised for me by the Veterans' Haven Treatment Team, into which I will have input.
2. NO ALCOHOLIC BEVERAGES PERMITTED.
3. NO ILLEGAL DRUGS PERMITTED.
4. NO WEAPONS OF ANY KIND PERMITTED.
5. SMOKING IS ALLOWED ONLY IN DESIGNATED AREAS OUTSIDE THE BUILDING. VETERANS' HAVEN IS A SMOKE-FREE FACILITY. NO EXCEPTIONS!
6. NO PHYSICAL OR VERBAL ABUSE WILL BE TOLERATED OR PERMITTED.
7. NO GAMBLING SHALL BE TOLERATED.
8. During the Orientation Phase (a period of not less than thirty {30} days) of my residency, I shall not leave the Program's facility for any reason except for bona fide emergencies and may only be approved by the Superintendent (or his or her designee) of the Program.
9. I will also comply with all of the rules and regulations outlined in the Resident's Handbook and as set forth in N.J.A.C. 5A:8.
I UNDERSTAND THAT A VIOLATION OF ANY OF THE ABOVE STATED RULES MAY RESULT IN MY REMOVAL FOR THE PROGRAM AND MAY MAKE ME LIABLE FOR PROSECUTION BY CIVIL AUTHORITIES.

SIGNATURE
DATE SIGNED

WITNESSED BY
DATE WITNESSED

APPENDIX B

NEW JERSEY DEPARTMENT OF MILITARY & VETERANS' AFFAIRS

VETERANS' HAVEN - SOUTH
PO Box 80
202 Spring Garden Road
Winslow, NJ 08096-0080
Phone: (609) 561-0269 FAX: (609) 561-7604

VETERANS' HAVEN - NORTH
200 Sanatorium Road,
Suite 101
Glen Gardner, NJ 08826
Phone: (908) 537-1999 FAX (908) 537-1990

PRE-ADMISSION SCREENING AND INTAKE UPON ADMISSION

Date of Interview: Interviewed by:
DECISION: Accepted: Rejected:
Accepted and May Enter As Soon As a Bed Is Available, if Certain Conditions Are Met:

Accepted, but Placed on a Delayed Acceptance List, because Requires Further Treatment:

DATE THAT POINT OF CONTACT (POC) NOTIFIED:

I. Personal Information:

- 1. Name: 2. SSN: 3. Gender: M / F
4. Age: DOB: 5. Ethnicity/Race:
6. Marital Status: Number of Dependents:
7. Name of Designated Contact Person:
Contact Person Address:
Contact Person Phone Numbers: Home Work Cell
8. Social Worker Name:
Social Worker Address:

Social Worker Phone Numbers: _____
Home Work Cell

9. Date of Discharge: _____ POC Name _____
If POC is not the Designated Contact Person or Social Worker listed above then:
POC Address: _____

POC Phone Numbers: _____
Home Work Cell

10. How long have you been homeless? _____
Last residence: _____
11. Branch of Service _____ Years served: _____
Combat veteran? Y / N If yes, where? _____
12. Type of Discharge: _____ RE Code (if known): _____
Reason, if less than honorable discharge: _____

II. Substance Abuse Information:

- 1. Drug(s) of Choice: _____
Period(s) of Use: _____
- 2. Last Use and Triggers: _____
- 3. Longest Period(s) of Staying Clean: _____
How did you maintain sobriety? _____
- 4. How many times have you been in rehab(s)? _____
Have you received substance abuse treatment elsewhere (e.g., MICA Program, halfway house, day program, outpatient visits)? _____
- 5. Do you attend/benefit from AA/NA meetings? _____
Do you have a home group and/or sponsor(s)? _____
Where do you go for support (e.g. family, friends, club, religious community)? _____
- 6. Do you have hobbies or special areas of interest that do not involve drug(s) use? _____
- 7. Do you have any other compulsive behavior(s) (e.g. nicotine, food, sex, work, gamble)? _____

III. Mental Health/Medical Issues:

- 1. Do you have a psychiatric diagnosis/emotional problems? _____
Are you receiving or do you need therapy for this? _____
- 2. Do you have a medical diagnosis/physical problems? _____
- 3. Are you taking medication(s)? _____
Are they working? _____
- 4. Are you receiving any other treatment? _____
Is it working? _____
- 5. Have you any known allergies? _____
- 6. Are you recovering from severe physical or sexual abuse? _____
PTSD? _____
- 7. Have you ever attempted suicide? _____
Have you ever had suicidal or homicidal ideation? _____

Do you have the desire and means to harm yourself or others now? _____

8. Do you hear voices within your head? _____

9. Have you been tested for Hepatitis? Y / N Results? _____

Have you been tested for TB? Y / N Results? _____

Have you been tested for HIV? Y / N Results? _____

10. How would you rate your mental health/physical health? _____

Interviewer(s) observation(s) of individual's mental health and physical health: _____

IV. Educational/Vocational History:

1. What education and vocational training have you had? _____

Are you a high school graduate? Y / N

Do you hold any licenses or certifications? _____

2. When did you last work? _____

What kind of job was it? _____

Was it part-time, full-time, or temporary? _____

Why did you leave? _____

Can you return? _____

3. What is the longest job you ever held? _____

Did you like or dislike it? _____ Would you return? _____

4. What do you consider to be your primary occupation? _____

5. If accepted to Veterans' Haven, what would you want to do educationally and/or vocationally? _____

V. Financial/Legal Issues:

1. Do you have income (e.g. VA Disability, unemployment compensation, Social Security)? _____

Do you have a checking and/or savings account? _____

Do you own property? _____

2. Do you have financial obligations (e.g. alimony, child support, unpaid Student loan(s), fine(s))? _____

3. Do you have any legal problems (e.g. arrested and convicted for a crime, been incarcerated, required to pay court appointed restitution, been on probation or parole, have an outstanding warrant for your arrest)? _____

Have you been arrested and convicted for assault or domestic abuse? _____

Have you ever been arrested and convicted under Megan's Law or a similar law against child molestation? _____

4. Do you have a driver's license? Y / N If yes, what state? _____

If no, why not (e.g. DWI or DUI)? _____

VI. Applicant Narrative:

1. What are some of your strong points? _____

Some of your weak points? _____

2. What do you see yourself doing in the next two years? _____

What is your biggest obstacle? _____

3. Any question(s) for the Treatment Team and Nurse? _____

VII. Interviewer(s) Observation(s)/Comments:

VIII. Applicant Statements:

1. I understand that, if I fail to answer any of the above questions completely and truthfully, then I will not be accepted or, if accepted, I will be discharged prematurely from Veterans' Haven.

Initials: _____

2. I understand that, if accepted to Veterans' Haven, I will be put on a Waiting List and that it is my responsibility to maintain contact with the Veterans' Haven Treatment Team at least every other week and that my failure to do so may be reason for removal from the Waiting List. If I am removed from the Waiting List, then I must reapply for admission. Furthermore, the Treatment Team may grant acceptance, but pending compliance with a request for additional interviews or information that would support admission to this residential program.

Initials: _____

3. I understand that, if admitted to Veterans' Haven, there is an Orientation Period of up to 90 days (in practice, usually 30-45 days). During this time, I may be Involuntarily Discharged, because I violated Veterans' Haven Rules and Policies, failed to adhere to my Treatment Plan, proved incompatible with Veterans' Haven as determined by the Treatment Team and Administration, or failed to disclose complete and accurate information upon admission.

Initials: _____

4. I understand that, if admitted to Veterans' Haven, I will be required to perform personal chores and collective duty assignments related to Veterans' Haven function and operation. Failure to complete these chores and assignments will be cause for disciplinary action/dismissal.

Initials: _____

5. I understand that, if admitted to Veterans' Haven, I must abide by Veterans' Haven rules and policies. These rules and policies are subject to change with verbal and/or written notice.

Initials: _____

Interviewee Signature: _____ Date: _____

ENVIRONMENTAL PROTECTION

(a)

ENVIRONMENTAL MANAGEMENT

Notice of Administrative Change
Worker and Community Right to Know Regulations
Definition of "Employer"

N.J.A.C. 7:1G-1.2

Take notice that the Department of Environmental Protection is making an administrative change to the table of North American Industry Classification System Codes (NAICS) published in the definition of "employer," N.J.A.C. 7:1G-1.2, in the Worker and Community Right to Know Regulations.

The Worker and Community Right to Know Regulations at N.J.A.C. 7:1G-1.7 provide a mechanism for revision to the NAICS codes in the definition of "employer" in the event that the Executive Office of the President, Office of Management and Budget, publishes new or revised NAICS codes modifying the 2002 list on which the definition of "employer" is based. N.J.A.C. 7:1G-1.7 provides that the Department shall publish notice of the new or revised NAICS codes and a corresponding notice of administrative change.

On August 17, 2011, the Office of Management and Budget published notice in the Federal Register combining NAICS codes 454311, Heating Oil Dealers, and 454312, Liquid Petroleum Gas (Bottled Gas) Dealers, under new NAICS Code 454310, Fuel Dealers. The existing exceptions and limitations are similarly merged. Accordingly, the Department is making a corresponding administrative change to the table of NAICS codes in the definition of "employer" at N.J.A.C. 7:1G-1.2.

Full text of the changed rule follows (additions indicated in boldface thus; deletions indicated in brackets [thus]):

7:1G-1.2 Definitions

The following words and terms, when used in this chapter, shall have the following meanings unless the context clearly indicates otherwise:

"Employer" means any person or corporation, regardless of whether he pays employees, in the State, engaged in business operations having the following United States North American Industry Classification System (NAICS) codes, dated and published in 2002 by the Executive Office of the President, Office of Management and Budget, ISBN 0-934213-87-9

(NTIS PB2002-502024), subject to the specified exceptions and limitations:

Table with 3 columns: Subsector Code or Industry Code, Description, Exceptions and/or Limitations. Rows include codes [454311, 454312, 454310] and descriptions like Heating Oil Dealers, Liquid Petroleum Gas (Bottled Gas) Dealers, Fuel Dealers.