

HISTORIC PRESERVATION PHONE 732-897-4162 Ext.200

Application #: HPC 2023 - 086

Application Date: 5 22 2023

Historic Preservation Commission Certificate of Appropriateness Application

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AC UNIT	☐ GATE	☐ RAILINGS
ADDITION	☐ GENERATOR	☐ RETAINING WALL
☐ ARBOR	☐ GUTTERS & LEADERS	ROOF
☐ AWNING	LI HOT TUB	CI SATELLITE DISH
☐ BALCONY	LATTICE	☐ SHED
☐ CHIMNEY	☐ LIGHT FIXTURE	☐ SHUTTERS
COLUMNS	☐ NEW CONSTRUCTION	☐ SIDING
□ DECK	☐ ORNAMENTATION	□ SIGN
DOOR REPLACEMENT	OUTDOOR SHOWER	☐ SKYLIGHT
☐ DRIVEWAY	☐ PAINT	SOLAR
☐ EXTERIOR ALTERATIONS	□ PATIO	☐ STAIRS
☐ FENCE	☐ PIERS	□ VENT
☐ FLAGS / BANNERS	□ PORCH	□ WALKWAY
☐ FOUNDATION	☐ PORCH FAN	WINDOWS
COLLED		
OTHER		
Guidelines are available online a Incomplete applications will not recomplete applications will not recomplete applications will not recomplete applications. We depending on the scope of work or any other useful references for additional information or copies of	t www.neptunetownship.org. Please type of be accepted. ith each application, you are required to proposed, architectural plans or sketches, review. Once your application is schedule f your application and other submitted doctors.	o submit color photos of the property, and, material samples, color samples, catalog cuts, d for a meeting, you may be required to submit
PROPERTY IDENTIFICATION	ADWAY OCEAN GRO	VE NEW JERSEY 07756
	and the state of t	QUALIFIER:
BLOCK: <u>355</u>	LOT:	QUALIFIER
OWNER INFORMATION NAME(S):	N + KERI KARMOZYN	
ADDRESS: 47 OLD	STONEHOUSE FOAD	BEDMINSTER, NJ 07921
PHONE:	EMAIL:	
APPLICANT INFORMATION -		
☐ Check if same as Owner		,
NAME(S): PATRICIA J.	MACK COMPANY:	2
ADDRESS: 140 BROA		NEW Jersey 07756
PHONE:	EMAIL:	
APPLICANT CAPACITY - IF O	THER THAN OWNER (Check one):	
	t 🗆 Contractor 🗀 Attorney 🗀 Other	co- owner
IV Lessee L'Agent L'Architec	t 🗆 Contractor 🗀 Attorney 🗀 Other	· · · · · · · · · · · · · · · · · · ·

PROPERTY TYPE (Check one):	
★ Single Family	al Li Condo Li Mixed Use
ARCHITECTURAL PERIOD / YEAR BUILT: 1900 ARC	
Does your project include demolition of 15% or more of extending the project include demolition of 15% or more of extending the project include demolition permit prior to apply the project include demolition permit prior to apply the project include demolition of 15% or more of extending the project include demolition of 15% or more of extending the project include demolition of 15% or more of extending the project include demolition of 15% or more of extending the project include demolition of 15% or more of extending the project include demolition of 15% or more of extending the project include demolition permit prior to apply the	
Do you have Zoning Department approval for this project? UZONING PERMIT ID# (from Zoning Permit): Please Note: If Zoning approval is required for the work de incomplete until Zoning approval is received. Incomplete approval is received.	DATE APPROVED: scribed on your application, your application will remain oplications will not be accepted.
Describe all proposed work to be conducted on subject materials to be used. Attach additional pages if necessary.	
replacing damaged + broken	windows/ not touching
replacing damaged + broken original windows in main	nome.
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project has been deemed to be complete.The information herein is correct and complete.	aff, HPC Members and HPC Professionals until the
be considered complete.	
By signing this application, the Owner authorizes the lipublic hearing before the Commission.	sted Applicant to appear as their representative at a
KERI KARMOZYN	*
OWNER NAME - Please PRINT	APPLICANT NAME Please PRINT
Jeren 2 ach	
OWNER SIGNATURE	APPLICANT SIGNATURE
5 22 70×3 DATE	DATE
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