

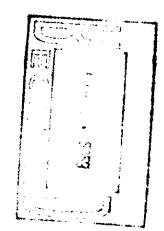
HISTORIC PRESERVATION PHONE 732-988-5200 FAX 732-988-4259

Application #: HPC 2023 - 0 나 9

Application Date: 2 23 23

Historic Preservation Commission Certificate of Appropriateness Application

	☐ GATE	☐ RAILINGS	=		
☐ AC UNIT☐ ADDITION	☐ GENERATOR	□ RETAINING WALL			
□ ARBOR	☐ GUTTERS & LEADERS	□ROOF	4		
AWNING	☐ HOT TUB	☐ SATELLITE DISH	23		
BALCONY	☐ ŁATTICE	SHED	2023		
□ 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	☐ WAŁKWAY			
□ FOUNDATION	D PORCH FAN	□ WINDOWS			
a recombanion	Gronellan	4 MINDOM 3			
□ OTHER					
depending on the scope of work proor any other useful references for r		material samples, color sample: d for a meeting, you may be req	s, catalog cuts.		
BLOCK: 265	211 01010				
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500K	LOT: <u>5</u>	_ QUALIFIER:			
OWNER INFORMATION					
OWNER INFORMATION			-		
OWNER INFORMATION NAME(S): Susan Eckstein/Karen Binge	rt				
OWNER INFORMATION NAME(S): Susan Eckstein/Karen Binge ADDRESS: 52 Cookman Ave.,	rt				
OWNER INFORMATION NAME(S): Susan Eckstein/Karen Binge ADDRESS: 52 Cookman Ave.,	ort Ocean Grove, NJ 07756				
OWNER INFORMATION NAME(S): Susan Eckstein/Karen Binge ADDRESS: 52 Cookman Ave., PHONE: APPLICANT INFORMATION	ort Ocean Grove, NJ 07756				
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DWNER INFORMATION NAME(S): Susan Eckstein/Karen Binge ADDRESS: 52 Cookman Ave., PHONE: APPLICANT INFORMATION Check if same as Owner	Ocean Grove, NJ 07756 EMAIL:				
DWNER INFORMATION NAME(S): Susan Eckstein/Karen Binge ADDRESS: 52 Cookman Ave., PHONE:	ocean Grove, NJ 07756 EMAIL: COMPANY: Chri				
DWNER INFORMATION NAME(S): Susan Eckstein/Karen Binge ADDRESS: 52 Cookman Ave., PHONE: APPLICANT INFORMATION Check if same as Owner NAME(S): Chris Mott ADDRESS: PO Box 37, Ocean	company: Chri				
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OWNER INFORMATION NAME(S): Susan Eckstein/Karen Binge ADDRESS: 52 Cookman Ave., PHONE: APPLICANT INFORMATION D Check if same as Owner NAME(S): Chris Mott ADDRESS: PO Box 37, Ocean PHONE: APPLICANT CAPACITY – IF OTI	COMPANY: Chri	s Mott Custom Builders, LLC			



OPERTY INFORMATION ROPERTY TYPE (Check one):					
☐ Single Family ☐ Multifamily: Units ☐	Commercial □ Condo □ Mixed Use				
ARCHITECTURAL PERIOD / YEAR BUILT: approx 1					
Does your project include demolition of 15% or n	nore of exterior of existing structure? YES NO ior to applying for a Certificate of Appropriateness.				
incomplete until Zoning approval is received. Inc	DATE APPROVED: 2/16/23 ne work described on your application, your application will remaisomplete applications will not be accepted.				
materials to be used. Attach additional pages if r	on subject property below. Be sure to include all colors and necessary.				
Demo existing 1st and 2nd floor porches and re	- build as per architect drawings attached.				
By signing this application, the Applicant and	Owner agree to the following:				
 Property site visits by Neptune To 	ownship Staff, HPC Members and HPC Professionals until the				
project has been deemed to be co					
	and complete to the best of your knowledge.				
 The HPC or HPC Application Rev be considered complete. 	iew Team may require additional information for your application to				
By signing this application, the Owner authori public hearing before the Commission.	izes the listed Applicant to appear as their representative at a				
Susan Eckstein	Chris Mott Custom Builders, LLC				
OWNER NAME - Please PRINT	APPEICANT NAME - Please PRINT				
Susan Extertur.	Ch Doll				
OWNER SIGNATURE	APPLICANT SIGNATURE				
2/22/23	2/22/23				
DATE	DATE				

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