

Application #: **HPC 2022-164**

 Application Date: **10/5/2022**

Historic Preservation Commission Certificate of Appropriateness Application

- | | | |
|---|--|--|
| <input checked="" type="checkbox"/> AC UNIT
<input type="checkbox"/> ADDITION
<input type="checkbox"/> ARBOR
<input type="checkbox"/> AWNING
<input type="checkbox"/> BALCONY
<input type="checkbox"/> CHIMNEY
<input checked="" type="checkbox"/> COLUMNS
<input type="checkbox"/> DECK
<input type="checkbox"/> DOOR REPLACEMENT
<input type="checkbox"/> DRIVEWAY
<input type="checkbox"/> EXTERIOR ALTERATIONS
<input type="checkbox"/> FENCE
<input type="checkbox"/> FLAGS / BANNERS
<input checked="" type="checkbox"/> FOUNDATION
<input checked="" type="checkbox"/> OTHER 200m CALL 11.15.22 | <input type="checkbox"/> GATE
<input type="checkbox"/> GENERATOR
<input type="checkbox"/> GUTTERS & LEADERS
<input type="checkbox"/> HOT TUB
<input checked="" type="checkbox"/> LATTICE
<input checked="" type="checkbox"/> LIGHT FIXTURE
<input checked="" type="checkbox"/> NEW CONSTRUCTION
<input type="checkbox"/> ORNAMENTATION
<input checked="" type="checkbox"/> OUTDOOR SHOWER
<input checked="" type="checkbox"/> PAINT
<input type="checkbox"/> PATIO
<input type="checkbox"/> PIERS
<input checked="" type="checkbox"/> PORCH
<input checked="" type="checkbox"/> PORCH FAN | <input checked="" type="checkbox"/> RAILINGS
<input type="checkbox"/> RETAINING WALL
<input checked="" type="checkbox"/> ROOF
<input type="checkbox"/> SATELLITE DISH
<input checked="" type="checkbox"/> SHED
<input type="checkbox"/> SHUTTERS
<input checked="" type="checkbox"/> SIDING
<input type="checkbox"/> SIGN
<input type="checkbox"/> SKYLIGHT
<input type="checkbox"/> SOLAR
<input checked="" type="checkbox"/> STAIRS
<input type="checkbox"/> VENT
<input checked="" type="checkbox"/> WALKWAY
<input checked="" type="checkbox"/> WINDOWS |
|---|--|--|

Please complete this application in its entirety.

Before submission of an application, the applicant is encouraged to review the Ocean Grove Historic District Architectural Design Guidelines for Residential Structures or Commercial Buildings and read the entire attached Information Sheet. The Guidelines are available online at www.neptunetownship.org. Please type or print legibly with ink. **Incomplete applications will not be accepted.**

REQUIRED INFORMATION: *With each application, you are required to submit color photos of the property, and, depending on the scope of work proposed, architectural plans or sketches, material samples, color samples, catalog cuts, or any other useful references for review. Once your application is scheduled for a meeting, you may be required to submit additional information or copies of your application and other submitted documents.*

PROPERTY IDENTIFICATION

 ADDRESS: **129 INSKIP AVE**
 BLOCK: **287** LOT: **7** QUALIFIER: _____

OWNER INFORMATION

 NAME(S): **Stacie Morgan**
 ADDRESS: **907 BOND ST. APT #1 ASBURY PARK NJ 07712**
 PHONE: **[REDACTED]** EMAIL: **[REDACTED]@100.COM**
APPLICANT INFORMATION
☒ Check if same as Owner

 NAME(S): _____ COMPANY: _____
 ADDRESS: _____
 PHONE: _____ EMAIL: _____

APPLICANT CAPACITY – IF OTHER THAN OWNER (Check one):
☐ Lessee ☐ Agent ☐ Architect ☐ Contractor ☐ Attorney ☐ Other: _____

PROPERTY INFORMATION

PROPERTY TYPE (Check one):

☒ Single Family ☐ Multifamily: _____ Units ☐ Commercial ☐ Condo ☐ Mixed Use

ARCHITECTURAL PERIOD / YEAR BUILT: _____ ARCHITECTURAL STYLE: Victorian Eclectic

Does your project include demolition of 15% or more of exterior of existing structure? ☐ YES ☐ NO

If YES: you must apply for a Demolition Permit prior to applying for a Certificate of Appropriateness.

Do you have Zoning Department approval for this project? ☒ YES ☐ NO ☐ N/A

ZONING PERMIT ID# (from Zoning Permit): 558457367 DATE APPROVED: 9/9/2022

Please Note: If Zoning approval is required for the work described on your application, your application will remain incomplete until Zoning approval is received. Incomplete applications will not be accepted.

Describe all proposed work to be conducted on subject property below. Be sure to include all colors and materials to be used. Attach additional pages if necessary.

1. Change of house color: Hardie Evening Blue
2. Concrete Steps on Forming from 9.29.2023 HPC response attached
3. Based on feedback from 9.29.2023 HPC response change West elevation stairwell window to Andersen 400 series TW18210 to match West Elevation bathroom window nearby
4. The relocation of the 1st floor bathroom window on the east elevation of the house will not be highly visible to the street or neighboring properties from any angle (see pictures). In keeping with the historic rhythm of windows the window in the bathroom will remain and one window on the Butler's pantry will be added to match bathroom to Andersen 400 series TW18210

By signing this application, the Applicant and Owner agree to the following:

- Property site visits by Neptune Township Staff, HPC Members and HPC Professionals until the project has been deemed to be complete.
- The information herein is correct and complete to the best of your knowledge.
- The HPC or HPC Application Review Team may require additional information for your application to be considered complete.

By signing this application, the Owner authorizes the listed Applicant to appear as their representative at a public hearing before the Commission.

Stacie Morgan

OWNER NAME - Please PRINT

Stacie Morgan

OWNER SIGNATURE

12.7.2023

DATE

SAME

APPLICANT NAME - Please PRINT

APPLICANT SIGNATURE

DATE