25 Neptune Bouelvard Neptune NJ 07753 732-988-5200 .x. 270

APPLICATION TO APPEAL DENIAL OF ZONING and/or HISTORIC PRESERVATION COMMISSION

The following information and checklist are given to assist you in the process of applying to the Board of Adjustment when seeking an appeal of a Zoning Permit denial or denial from the Historic Preservation Commission (HPC).

Please review and submit the following with your request:

_	1.	Commission's Decision (containing six [6] sheets).
	2.	Survey of the property drawn to scale; survey must show the block and lot numbers of the property, dimensions of the lot, dimensions of present and proposed structure(s), location of all structures, and distance between structures and property lines.
	3.	Copy of the Zoning Permit Denial, which was provided by the Zoning Officer, or a copy of the Denial from the Historic Preservation Commission. Please note: when appealing an HPC Denial, a copy of the HPC hearing transcript is required. You may request information on obtaining a hearing transcript from the HPC Administrator (732-988-5200 .x. 204).
	4.	Drawings of the proposed structure (if applicable), and a written description of the proposed project. Be advised that It is helpful to the Board that you provide as much detailed information as possible to assist the members in their review of your appeal.
	5.	Recent color photos of the structure (if applicable) as it exists; photos should show front, rear, and both side elevations.
	6.	Corporate Documents if the Applicant is a corporation; or LLC formation documents if Applicant is an LLC.
	7.	Required fees, consisting of Application fee of \$100, and Escrow Deposit of \$750. <i>Please note: two separate checks made payable to the Township of Neptune in these amounts are required at time of filing.</i>

All of the above listed items are required in order for the application to be deemed complete. An omission of any one or more items will be reason to deem the application incomplete and will require resubmission.

The information below roughly outlines the steps involved in processing an application for an appeal:

After you submit your application, fees, and supporting documents, your application will be reviewed for completeness. At that time, you will receive notification advising you whether your application is "complete". If your application is deemed "incomplete", you will be asked to provide the additional information as outlined in the notification. If your application is deemed "complete", you will receive a letter advising you of your scheduled hearing date.

When you receive your hearing letter, it will include further instructions regarding the process necessary to notify the public of your application, and the notice requirements for the newspaper.

Though not mandatory, you may wish to have your contractor and/or professionals attend the hearing to answer any questions you are unable to answer. In general, the Board can make its decision at the first meeting/hearing unless the Applicant has failed to provide sufficient information.

Please note that application fees are not refundable whether your application has been approved or denied; however, any unused portion of your escrow deposit will be refunded to you. A written request for such refund must be received by the Board Office in order to begin the refund process.

Should you have any questions or require assistance with the application process, please contact the Board Office either by phone (732-988-5200 .x. 270), or by email (hkepler@neptunetownship.org).



Neptune Township Board of Adjustment

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APPLICATION TO APPEAL DENIAL OF ZONING and/or HISTORIC PRESERVATION COMMISSION

Application #		/	
Date Filed	_/	_/	
Hooring Data	,	,	

	F VARIANCE REQUESTED Bulk Variance (front, side				
	Bulk Variance (lot covera	 nge):			
_					
Pro	operty Address:				
Blo	ock:	Lot:			
			o Neptune Township Land Development Ordinance.		
Na	me of Applicant:				
Ph	one #:	Fax #:	Cell #:		
E-r	mail Address:				
Na	me of Owner:				
Ma	ailing Address:				
Ph	one #:	Fax #:	Cell #:		
Ma	ailing Address:				
			Cell #:		
E-r	nail Address:				
Ар	plicant's Attorney:		Company:		
	ailing Address:				
Ph	one #:	Fax #:	Cell #:		
E-r	mail Address:				
Ар	plicant's Engineer:		Company:		
Ma	ailing Address:				
Ph	one #:	Fax #:	Cell #:		
E-r	mail Address:				
Ар	Applicant's Architect: Company:				
Ma	Mailing Address:				
Ph	one #:	Fax #:	Cell #:		
E-r	mail Address:				
Ар	pplicant's Surveyor: Company:				
Ma	ailing Address:				
Ph	one #:	Fax #:	Cell #:		
E-r	nail Address:				
	Applicant's Planner: Company:				
Ma	ailing Address:				
Ph	one #:	Fax #:	Cell #:		



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Special Flood Hazard Area:			
_			
INCIPAL USE:			
	REQUIRED and/or PERMITTED	EXISTING	PROPOSED
LOT SIZE			
LOT COVERAGE			
BUILDING COVERAGE			
BUILDING HEIGHT			
FRONT SETBACK			
REAR SETBACK			
SIDE SETBACK			
COMBINED SIDE SETBACK			
	REQUIRED and/or PERMITTED	EXISTING	PROPOSED
LOT SIZE	REQUIRED and/or PERMITTED	EXISTING	PROPOSED
LOT SIZE LOT COVERAGE	REQUIRED and/or PERMITTED	EXISTING	PROPOSED
	REQUIRED and/or PERMITTED	EXISTING	PROPOSED
LOT COVERAGE	REQUIRED and/or PERMITTED	EXISTING	PROPOSED
LOT COVERAGE BUILDING COVERAGE	REQUIRED and/or PERMITTED	EXISTING	PROPOSED
LOT COVERAGE BUILDING COVERAGE BUILDING HEIGHT FRONT SETBACK REAR SETBACK	REQUIRED and/or PERMITTED	EXISTING	PROPOSED
LOT COVERAGE BUILDING COVERAGE BUILDING HEIGHT FRONT SETBACK	REQUIRED and/or PERMITTED	EXISTING	PROPOSED

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10. If a Zoning denial or denial from the Historic Preservation Commission has been received as part of this application, please attach.

The required submission for all applications to be complete is:

- Twenty-five (25) copies of a completed application form, inclusive of any supporting information.
- Twenty-five (25) copies and one (1) CD* of survey and/or plan(s) with one (1) additional copy of survey and/or plan(s) on 11' x 17' sheet(s).

*See §802B - Completeness Checklist for Use Variance and Bulk Variance Request for details on submission requirements.

	OF APPLICATION
	of New Jersey
County	of Monmouth
(INSERT APPLICANT'S NAME)	, being of full age, being duly sworn according to Law, on oath
deposes and says that all the above statements are true.	
reposes and says that an the above statements are true.	
	(ORIGINAL SIGNATURE OF APPLICANT TO BE NOTARIZED)
	(PRINT NAME OF APPLICANT)
Sworn and subscribed before me this	
worn and subscribed before the this	
day of	
	[NOTARY SEAL]
	·
(SIGNATURE OF NOTARY PUBLIC)	



OWNER'S AFFIDAVIT OF AUTHORIZATION AND CONSENT STATEMENT OF LANDOWNER WHERE APPLICANT IS NOT LANDOWNER

(Original signatures only – copies will not be accepted)

In the matter before the (INSERT PLANNING BOARD or BC	in the Township of Neptune,
· · · · · · · · · · · · · · · · · · ·	•
State of New Jersey, County of Monmouth, I/We,	(INSERT PROPERTY OWNER'S NAME[S])
with mailing address of(INSERT PRO	
of full age being duly sworn according to oath depose(s) and	u say(s).
"I/We am/are the Owner(s) of the subject pro	operty in connection with this application
designated as Block(s)	Lot(s),
also known as	
also known as (INSERT PHYSICAL A	DDRESS OF SUBJECT PROPERTY)
I/We authorize(INSERT NAME OF OWNER(S)	' DEDDECENTATIVE ADDEADING DECODE THE BOARD)
	justment of the Township of Neptune for such
to appear to the Flamming Board, Board of Au	justifient of the rownship of Neptune for such
	erty listed above, consent to such appeal and e Planning Board/Board of Adjustment on such
appeal shall be binding upon me/us as if said	appeal has been brought and prosecuted directly
by me/us as the Owner(s).	
	(ORIGINAL SIGNATURE OF APPLICANT TO BE NOTARIZED)
Sworn and subscribed before me this	(ORIGINAL SIGNATURE OF APPLICANT TO BE NOTARIZED)
Sworn and subscribed before me this	(ORIGINAL SIGNATURE OF APPLICANT TO BE NOTARIZED)
Sworn and subscribed before me this day of, 20	(ORIGINAL SIGNATURE OF APPLICANT TO BE NOTARIZED)
Sworn and subscribed before me this day of, 20	(ORIGINAL SIGNATURE OF APPLICANT TO BE NOTARIZED) [NOTARY SEAL]





SITE VISIT AUTHORIZATION OF PROPERTY OWNER

I hereby authorize any member of the Township of Neptune Planning Board or Board of Adjustment, any of said Board's professionals or any reviewing agencies of the Board to enter upon the property which is the subject matter of this application, during daylight hours, for the limited purpose of viewing same to report and comment to the Board as to the pending application.

Date: ______ (SIGNATURE OF PROPERTY OWNER)

	STATEMENT FROM TAX COLLECTOR
Block:	Lot:
Property location:	
	xes:
Status of municipal to	kes:for local improvements:
Status of municipal to	



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ESCROW AGREEMENT

I/We fully understand an "Escrow Account" will be established to cover the costs of professional services which may include engineering, planning, and/or architectural services, and any other expenses incurred in connection with the review of this application before the Planning Board/Board of Adjustment.

The amount of the Escrow deposit will be determined by the Neptune Township Land Development Ordinance §1000 - Application and Escrow Fees, Table 10.02 - Escrow Fees.

It is the policy of Neptune Township that once an Escrow Account falls below 24% of the original deposit amount, the account must be replenished to its original amount. The only exception would be when the application is nearing completion; in such cases, the Applicant will be notified of any anticipated charges and the amount of the additional deposit required.

Payments shall be due within fifteen (15) days of receipt of the request for additional Escrow Funds. If payment is not received within that time, the Applicant will be considered to be in default, and such default may jeopardize further appearance before the Board, and delay any and all pending approvals and the issuance of building permits. Continued failure to submit requested funds will result in legal action against the property.

In accordance with N.J.S.A. 40:55D-53.1, all unused portion of the Escrow Account will be refunded upon written request from the Applicant, and verification by the Board's professionals who reviewed the application.

By signature below, I/We acknowledge receipt of Neptune Township's §1000 - Application and Escrow Fees, and agree to all conditions listed.

Name of Applicar	nt:		
••		(PLEASE PRINT)	
Property Address	::		
Block:	Lot:		
Applicant:	(PRINT NAME)	(SIGNATURE OF APPLICANT)	Date:
Owner:			Date:
	(PRINT NAME)	(SIGNATURE OF OWNER)	