## COMPLETENESS CHECKLIST FOR USE AND/OR BULK VARIANCES (Revised 5/13/13)

### Section §802B. Completeness Checklist for Use Variance and Bulk Variance Request.

Prior to issuance of a Certificate of Completeness, the Administrative Officer shall determine that the following documents have been submitted:

$\mathbf{C}_{\mathbf{C}}$	N	N/A*	<u>W*</u>	<u>ON</u>	ILY FOLDED PLANS WILL BE ACCEPTED
X				1.	Twenty-five (25) copies of completed and signed application form which must include the following:
					Applicant's name, address, telephone number, facsimile number, and e-mail address (if applicable).
					Property Owner's name, address, telephone number, facsimile number, and e-mail address (i applicable).
					Applicant's interest in the property.
					Name, address, telephone number, facsimile number, and e-mail address (if applicable) of the Applicant's attorney (if represented) as well as any and all other professional representative(s).
					Street address of the property
					Tax lot and block numbers of the property
					Zoning District in which the property is located.
					Description of the property
					Description of the proposed development.
					Type of application
					Provide identification of subject property/properties' Special Flood Hazard Area Zone
					Executed copy of "Authorization & Consent Form" Part "C"
					Executed copy of "Certificate of Ownership" Part "D", if applicable
					Executed copy of "Certificate of Corporation/Partnership", if applicable
	្				Applicant/Owner to provide verification of taxes paid (this will be further verified by the Administrative Officer).
	ij				Executed copy of "Escrow Agreement" Part "E"
		$\square$		2.	Twenty-five (25) copies of the property deed(s).
$\boxtimes$				3.	Twenty-five (25) copies of the Zoning Permit Denial [not required for subdivisions]
	ř			4.	Required Plans folded, no larger than 30"x42":
					a. Twenty-five (25) copies of current signed & sealed survey, prepared by a New Jersey Licensed Professional Land Surveyor.
X					b. Five (5) copies with initial submission and each subsequent submission for completeness review.
	Ø				c. Once the application is deemed complete, twenty (20) additional full-sized paper sets of the plans plus one (1) reduced-size paper set of the plans no larger than 11"x17", and one (1) CD containing the plans in .pdf format must be submitted to the Board Office for distribution.
				5.	Six (6) copies of Tree Removal Application package in accordance with Section §525 of applicable).
				6.	Community Impact Statement (for Use Variance only)
X				7.	Application Fee \$ 100.00 Escrow Deposit \$ 750.00
					In accordance with fee schedule.
C = C	omplete		N = Ir	icom	elete N/A = Not Applicable

\* Any request for a "WAIVER" must include a written explanation for the request.

Neptune Township 25 Neptune Blvd. Neptune, New Jersey 07753 732-988-5200 ext. 278 Fax 732-988-4259 www.neptunetownship.org



Application #	<i>‡</i> /
Date Filed	/ /
Hearing Date	//

#### Application for Use and/or Bulk Variances

### Type of Variance Requested: Bulk Variance [front, side/rear setback, other] Specify \_\_ Expansion of a non-conforming 7.5 ft wide driveway in the Flared Open Space Area to 9.0 ft in width w/o zoning approval Installation of a 3 ft. wide esternmost walkway adjacent to the front main walkway in the Flared Open Space Area without zoning approval Expansion of the westernmost walkway adjacent to the front main walkway to 3.0 ft without zoning approval Bulk Variance [Lot Coverage] 1600 sf permitted, and 1676.88 sf exists and is proposed Use Variance [proposal not permitted in zone] n/a Appeal/Interpretation of Decision n/a Other, Specify Reconstruction of the front entryway platform within the Flared Open Space Area without Zoning Approval Property Address: 9 Heck Avenue 211 Block Lot 10 Property is located in HD-O Zoning District according to the Neptune Twp. Land Ordinance. Name of applicant: Estate of Ruth Antes by Susan Antes Mailing address: 9 Heck Avenue, Ocean Grove, NJ 07753 Phone # \_\_\_\_\_ Fax # \_\_\_\_ Cell # \_\_\_\_ E-mail address: 5. Name of owner: Estate of Ruth Antes Mailing address: 9 Heck Avenue, Ocean Grove, NJ \_\_\_\_\_ Fax # \_\_\_\_\_\_Cell # \_\_\_\_\_ Phone # E-mail address: 6. Name of contact person: Mailing address: Phone # Fax # Cell #\_\_\_\_ E-mail address: 7. Interest of applicant, if other than owner:

Detailed Information:
Existing use of property: Detached single family residence
Proposed use of property: Detached single family residence
• Special Flood Hazard Area: NO

#### Principal Use:

	Required and/or Permitted	Existing	Proposed
Lot Size	1,298.24 sf		
Lot Coverage	90% (1620 sf)	1676.88 sf	1676.88 sf
Building Coverage	85% (1530 sf)	903.76 sf	903.76 sf
Building Height	35 ft	<35 ft	<35 ft
Front Setback	**	**	**
Rear Setback	0	1.01.7 ft	1.01.7 ft
Side Setback	2	2.28 ft and 2.06 ft	2.28 ft and 2.06 ft
Combined Side Setback	4	4.34 ft	4.34 ft

(If multiple lots and/or buildings, please attach additional detailed listing)

#### Accessory: (If Applicable)

	Permitted	Existing	Proposed
Lot Size			
Not Coverage		,	
Building Coverage			
Building Height			
Front Setback			
Rear Setback			V
Side Setback			
Combined Side Setback			

(If multiple lots and/or buildings, please attach additional detailed listing)

8.	Has there been any previous applications involving these premises Yes No	
	If so when	
	Result of decision	

Justification/Reason(s) for variance(s) requested [be as specific as possible attach additional sheets as necessary]				
•				
If a Zoning denial has been re	eceived as part of this application, please attach.			
inclusive of any supporting in one (1) additional copy of sur	all applications to be complete is twenty-five (25) copies of completed application form formation; and twenty-five (25) copies and one (1) CD* of survey and/or plan(s) with vey and/or plan(s) on 11" x 17" sheet(s).  eness Checklist for Use Variance and Bulk Variance Request for details on			
	AFFIDAVIT OF APPLICATION			
	State of New Jersey County of Monmouth			
Susan Antes	being of full age, being duly sworn according to			
(Insert Applicant's	s Name)  sys that all the above statements are true.			
Law, on oath depose and sa	All Dank Or Land			
	(Original Signature of Applicant to be Notarized)			
	Susan Antes			
·	(Print Name of Applicant)			
Sworn and subscribed bef	ecem be 120			
Signature of Notar	[NOTARY SEAL]  RONALD J. TROPPOLI, ESQ.  ATTORNEY AT LAW OF N.J.			

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# SITE VISIT AUTHORIZATION OF PROPERTY OWNER

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

1-1.1

Date:

Date: /2//4/2020	Susan Onto	
/ //	Signature of Property Owner	Section between the section of the s
		•
		i
STAT	FEMENT FROM TAX COLLECTOR	
Block Lot		i.
Property Location		
Status of municipal taxes		
Status of assessments for local impa		

Authorized Signature of Tax Collector

## Escrow Agreement

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

The amount of the Escrow Deposit will be determined by the Neptune Township Land Development Ordinance, section 1000 Application and Escrow Feed, 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; applicant will be notified of any anticipated charges and the amount of the 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, applicant will be considered to be in default, and such default may jeopardize appearance before the Board of hold up any and all pending approvals and building permits. Continued refusal will result in legal action against the property.

Also 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 Section 1000, Application and Escrow Fees and agree to all conditions listed.

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Name of Applicant: Susan Antes	4	•
[please print]		
Property Address: 9 Heck Avenue, Ocean Grove	Block 211	10 
Applicant's Name: Susan Antes [Print Name]	Super Cor [Signature of A]	De De
Owner's Name: 5 Me a Satoole [Print Name]	[Signature of Ov	wner]
Date: [2/14/20		