

Application for Use and/or Bulk Variances

Type of Variance Requested:

- Bulk Variance [front, side/rear setback, other] Specify request for approval to place gutters on east + west side of house to eliminate further damage to foundation + water infiltration in basement. Property structure is nonconforming but needs gutters to save structure!
- Bulk Variance [Lot Coverage] _____
- Use Variance [proposal not permitted in zone] Gutters
- Appeal/Interpretation of Decision _____
- Other, Specify _____

1. Property Address: 73 COOKMAN AVE, OCEAN GROVE
2. Block 249 Lot 13
3. Property is located in HDR1 Zoning District according to the Neptune Twp. Land Ordinance.
4. Name of applicant: JENNIFER HAET
Mailing address: 410 West Saddle River Rd., Upper Saddle River, NJ 07458
Phone # n/a Fax # n/a Cell # [REDACTED]
E-mail address: [REDACTED]
5. Name of owner: same as above
Mailing address: _____
Phone # _____ Fax # _____ Cell # _____
E-mail address: _____
6. Name of contact person: same as above applicant
Mailing address: _____
Phone # _____ Fax # _____ Cell # _____
E-mail address: _____
7. Interest of applicant, if other than owner: _____

Detailed Information:

- Existing use of property: 2 Family
- Proposed use of property: 2 Family
- Special Flood Hazard Area: n/a

Principal Use:

	Required and/or Permitted	Existing	Proposed
Lot Size			
Lot Coverage			
Building Coverage			
Building Height			
Front Setback			
Rear Setback			
Side Setback			
Combined Side Setback			

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

Accessory: (If Applicable)

	Permitted	Existing	Proposed
Lot Size			
Lot Coverage			
Building Coverage			
Building Height			
Front Setback			
Rear Setback			
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 _____

9. Justification/Reason(s) for variance(s) requested [be as specific as possible attach additional sheets as necessary]

see attached plans. Will install 4" round gutters where noted.

10. If a Zoning denial 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 completed application form inclusive of any supporting information; and 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 Section 802B. Completeness Checklist for Use Variance and Bulk Variance Request for details on submission requirements.

AFFIDAVIT OF APPLICATION

State of New Jersey
County of Monmouth

Jennifer Haet

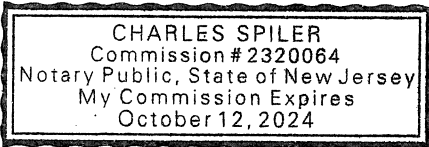
(Insert Applicant's Name)

being of full age, being duly sworn according to

Law, on oath depose and says that all the above statements are true.

[Handwritten Signature]

(Original Signature of Applicant to be Notarized)



Jennifer Haet

(Print Name of Applicant)

Sworn and subscribed before me this

14th day of June, 2021


Charles Spiler

Signature of Notary Public

[NOTARY SEAL]

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 daylight hours, for limited purpose of viewing same to report and comment to the Board as to the pending application.

Date: 6/14/21 _____  _____
Signature of Property Owner

STATEMENT FROM TAX COLLECTOR

Block _____ Lot _____

Property Location _____

Status of municipal taxes _____

Status of assessments for local improvements _____

Date: _____

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 Fee, 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.

Name of Applicant: Jennifer Hart
[please print]

Property Address: 73 Cookman Ave Block 249 Lot 13

Applicant's Name: Jennifer Hart [Print Name] [Signature] [Signature of Applicant]

Owner's Name: Jennifer Hart [Print Name] [Signature] [Signature of Owner]

Date: 6/14/21