

COMPLETENESS CHECKLIST for USE and/or BULK VARIANCES

§802B. Completeness Checklist for Use Variance and Bulk Variance Request. (Last revised by Ordinance No. 13-17.)

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

- | C | I | N/A | W* | |
|---|--------------------------|-------------------------------------|-------------------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 1. Twenty-five (25) copies of completed and signed application form, which must include the following: |
| | | | <input checked="" type="checkbox"/> | Applicant's name, address, telephone number, facsimile number and e-mail address. |
| | | | <input checked="" type="checkbox"/> | Property Owner's name, address, telephone number, facsimile number and e-mail address. |
| | | | <input checked="" type="checkbox"/> | Applicant's interest in the property. |
| | | | <input type="checkbox"/> | Name, address, telephone number, facsimile number and e-mail address of the Applicant's attorney (if represented), and any and all other professional representatives. |
| | | | <input checked="" type="checkbox"/> | Street address of property under consideration. |
| | | | <input checked="" type="checkbox"/> | Tax Block and Lot numbers of property. |
| | | | <input checked="" type="checkbox"/> | Zoning District in which property is located. |
| | | | <input checked="" type="checkbox"/> | Description of the property. |
| | | | <input checked="" type="checkbox"/> | Description of the proposed development. |
| | | | <input checked="" type="checkbox"/> | Type of application (i.e., Use Variance or Bulk Variance). |
| | | | <input checked="" type="checkbox"/> | Identification of subject property's Special Flood Hazard Area Zone. |
| | | | <input checked="" type="checkbox"/> | Executed copy of "Authorization & Consent Form" Part C. |
| | | | <input type="checkbox"/> | Executed copy of "Certificate of Ownership" Part D, if applicable. |
| | | | <input type="checkbox"/> | Executed copy of "Certificate of Corporation/Partnership", if applicable. |
| | | | <input type="checkbox"/> | Verification of taxes paid (this will be further verified by the Administrative Officer). |
| | | | <input checked="" type="checkbox"/> | Executed copy of "Escrow Agreement" Part E. |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 2. Twenty-five (25) copies of the property deed(s). |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 3. Twenty-five (25) copies of the Zoning Permit denial. ✓ |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 4. Required plans, folded, no larger than 30" x 42". |
| PLEASE NOTE: Only folded plans will be accepted, and all submitted plans must be to scale. | | | | |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | a. Twenty-five (25) copies of current signed & sealed survey, prepared by a New Jersey Licensed Professional Land Surveyor. |
| <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | 5. Five (5) copies of site plans/construction plans with initial submission and with each subsequent submission, for completeness review. |
| <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | 6. Once the application is deemed complete, twenty (20) additional full-sized paper site plans/construction plans, plus one (1) reduced-size paper copy of the plans (no larger than 11" x 17"), and one (1) CD containing the plans in .pdf format. |
| <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | 5. Six (6) copies of Tree Removal Application package in accordance with §525 (if applicable). |
| <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | 6. Community Impact Statement (for Use Variance only). |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 7. Application Fee \$ <u>100-</u> Escrow Deposit \$ <u>750-</u> in accordance with schedule. |
| PLEASE NOTE: Application Fee and Escrow Deposit must be paid in separate checks. | | | | |

payable to Neptune Twp.

*Any request for a waiver must include a written explanation for the request.

APPLICATION for USE and/or BULK VARIANCES

TYPE OF VARIANCE REQUESTED:

- Bulk Variance (front, side/rear setback, other) – Specify: WIDTH OF DRIVEWAY / SETBACK FROM LOT CORNER
- Bulk Variance (lot coverage): _____
- Use Variance (proposal not permitted in zone): _____
- Appeal/Interpretation of Decision: _____
- Other - Specify: _____

1. Property Address: 121 SYCAMORE STREET NEPTUNE, NJ 07753
2. Block: 2918 Lot: 5
3. Property is located in RESIDENTIAL Zoning District, according to Neptune Township Land Development Ordinance.
4. Name of Applicant: JOSEPH ABATEMARCO
Mailing Address: 121 SYCAMORE STREET NEPTUNE, NJ 07753
Phone #: _____ Fax #: _____ Cell #: _____
E-mail Address: _____
5. Name of Owner: JOSEPH ABATEMARCO
Mailing Address: 121 SYCAMORE STREET NEPTUNE, NJ 07753
Phone #: _____ Fax #: _____ Cell #: _____
E-mail Address: _____
6. Interest of Applicant, if other than Owner: _____
7. Name of Contact Person: _____
Mailing Address: _____
Phone #: _____ Fax #: _____ Cell #: _____
E-mail Address: _____
8. Applicant's Attorney: N/A Company: _____
Mailing Address: _____
Phone #: _____ Fax #: _____ Cell #: _____
E-mail Address: _____
9. Applicant's Engineer: JOSEPH KOZLOVA Company: KBA ENGINEERING SERVICES
Mailing Address: 2517 RT 35 BLDG-E STE 203 MANASQUAN, NJ 08736
Phone #: 732-722-8555 Fax #: _____ Cell #: _____
E-mail Address: PLANS@KBAENGINEERS.COM
10. Applicant's Architect: MARK MARQUE Company: MARCELLE ARCHITECTURE
Mailing Address: 505 MAIN STREET 2ND FL METUCHEN, NJ 08840
Phone #: 732-662-5824 Fax #: _____ Cell #: _____
E-mail Address: MARK@MPM-ARCH.COM
11. Applicant's Surveyor: ALAN BOETTGER Company: CLEARPOINT SERVICES
Mailing Address: 640 HERMAN RD #1 JACKSON, NJ 08627
Phone #: 732-905-5463 Fax #: _____ Cell #: _____
E-mail Address: _____
12. Applicant's Planner: _____ Company: _____
Mailing Address: _____
Phone #: _____ Fax #: _____ Cell #: _____
E-mail Address: _____

DESCRIPTION OF PROPERTY (e.g., Single Family Dwelling, Commercial/Retail):

Existing use of property: SINGLE FAMILY DWELLING
 Proposed use of property: SINGLE FAMILY DWELLING
 Special Flood Hazard Area: N/A

PRINCIPAL USE: PRIMARY RESIDENCE

	REQUIRED and/or PERMITTED	EXISTING	PROPOSED
LOT SIZE	10,000 SF.	12,500 S.F.	
LOT COVERAGE	40%	41.58%	41.58
BUILDING COVERAGE	30%	29.4%	
BUILDING HEIGHT	35 FT	29.60 FT	
FRONT SETBACK (BY ZONING)	25 FT	30.5 FT	
REAR SETBACK	30 FT	35.6 FT	
SIDE SETBACK	10 FT	10.4 FT	
COMBINED SIDE SETBACK	25 FT	25.3 FT	

FRONT SETBACK (PROPOSED)
 (If multiple lots and/or buildings, please attach additional detailed listing for each.)

ACCESSORY (if applicable):

	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 for each.)

8. Have there been any previous applications to the Planning Board or Board of Adjustment involving these premises?

YES NO

If YES, please give date(s): _____

Result of decision: _____

9. Justification/reason(s) for variance(s) requested. (Be as specific as possible; attach additional sheets if necessary.):

DUE TO CURB OPENING TO DRIVEWAY HAVING TO BE 40 FT FROM PROPERTY LINE
THERE IS A HARDSHIP TO BACK OUT OF FRONT GARAGE AND EXIT DRIVEWAY
WITHOUT EXECUTING A K TURN ON DRIVEWAY. ADDITIONAL 4 3/4 FT OF DRIVEWAY
IS NEEDED TO ACCOMMODATE THE PROCEDURE.

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 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.

AFFIDAVIT OF APPLICATION

State of New Jersey
County of Monmouth

JOSEPH ABATEMARCO
(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.


(ORIGINAL SIGNATURE OF APPLICANT TO BE NOTARIZED)

JOSEPH ABATEMARCO
(PRINT NAME OF APPLICANT)

Sworn and subscribed before me this

14 day of March, 2022

[NOTARY SEAL]

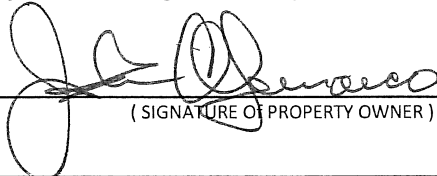


LEONARD CASELLA
NOTARY PUBLIC OF NEW JERSEY
My Commission Expires 5/8/2023

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: 3-11-22


(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 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.

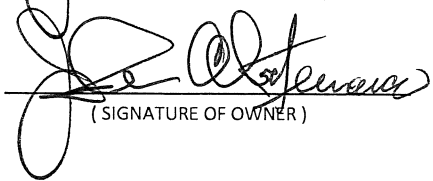
Payments shall be due within fifteen (15) days of receipt of the request for additional Escrow Funds. If payment is not received within that time, the Applicant will be considered to be in default, and such default may jeopardize further appearance before the Board, and delay any and all pending approvals 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 Applicant: JOSEPH ABATEMARCO
(PLEASE PRINT)
Property Address: 121 SYCAMORE STREET NEPTUNE, NJ 07753
Block: 2918 Lot: 5

Applicant: JOSEPH ABATEMARCO
(PRINT NAME) 
(SIGNATURE OF APPLICANT) Date: 3-11-22

Owner: JOSEPH ABATEMARCO
(PRINT NAME) 
(SIGNATURE OF OWNER) Date: 3-11-22