

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:

<u>C</u>	<u>N</u>	<u>N/A*</u>	<u>W*</u>	<u>ONLY FOLDED PLANS WILL BE ACCEPTED</u>
<input checked="" 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: <ul style="list-style-type: none"> <li><input checked="" type="checkbox"/> Applicant's name, address, telephone number, facsimile number, and e-mail address (if applicable).</li> <li><input checked="" type="checkbox"/> Property Owner's name, address, telephone number, facsimile number, and e-mail address (if applicable).</li> <li><input checked="" type="checkbox"/> Applicant's interest in the property.</li> <li><input checked="" type="checkbox"/> 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).</li> <li><input checked="" type="checkbox"/> Street address of the property</li> <li><input checked="" type="checkbox"/> Tax lot and block numbers of the property</li> <li><input checked="" type="checkbox"/> Zoning District in which the property is located.</li> <li><input checked="" type="checkbox"/> Description of the property</li> <li><input checked="" type="checkbox"/> Description of the proposed development.</li> <li><input checked="" type="checkbox"/> Type of application</li> <li><input checked="" type="checkbox"/> Provide identification of subject property/properties' Special Flood Hazard Area Zone</li> <li><input checked="" type="checkbox"/> Executed copy of "Authorization &amp; Consent Form" Part "C"</li> <li><input checked="" type="checkbox"/> Executed copy of "Certificate of Ownership" Part "D", if applicable</li> <li><input checked="" type="checkbox"/> Executed copy of "Certificate of Corporation/Partnership", if applicable</li> <li><input checked="" type="checkbox"/> Applicant/Owner to provide verification of taxes paid (this will be further verified by the Administrative Officer).</li> <li><input checked="" type="checkbox"/> Executed copy of "Escrow Agreement" Part "E"</li> </ul>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	2. Twenty-five (25) copies of the property deed(s).
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	3. Twenty-five (25) copies of the Zoning Permit Denial [not required for subdivisions]
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	4. Required Plans folded, no larger than 30"x42": <ul style="list-style-type: none"> <li>a. Twenty-five (25) copies of current signed &amp; sealed survey, prepared by a New Jersey Licensed Professional Land Surveyor.</li> <li>b. Five (5) copies with initial submission and each subsequent submission for completeness review.</li> <li>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.</li> </ul>
<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 Section §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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	7. Application Fee \$ <u>100.00</u> Escrow Deposit \$ <u>750.00</u>

In accordance with fee schedule.

C = Complete      N = Incomplete      N/A = Not Applicable

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

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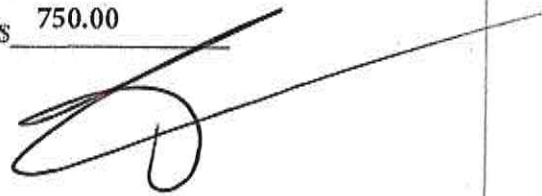
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**Application for Use and/or Bulk Variances**

**Type of Variance Requested:**

- Bulk Variance [front, side/rear setback, other] Specify \_\_\_\_\_  
Minumm Lot area - Existing Non-Conforming 15,000 s.f. required; whereas 12,000 s.f. is provided.  
\_\_\_\_\_
- Bulk Variance [Lot Coverage] \_\_\_\_\_ N/A
- Use Variance [proposal not permitted in zone] \_\_\_\_\_ Expansion of a non-conforming use
- Appeal/Interpretation of Decision \_\_\_\_\_
- Other, Specify \_\_\_\_\_

1. Property Address: \_\_\_\_\_ 1526 Corlies Avenue
2. Block \_\_\_\_\_ 1108 \_\_\_\_\_ Lot \_\_\_\_\_ 4 \_\_\_\_\_
3. Property is located in \_\_\_\_\_ C-6 \_\_\_\_\_ Zoning District according to the Neptune Twp. Land Ordinance.
4. Name of applicant: \_\_\_\_\_ JAD Group - John Deatcher  
Mailing address: \_\_\_\_\_ 1528 Corlies Avenue, Neptune, NJ 07753  
Phone # \_\_\_\_\_ Fax # \_\_\_\_\_ Cell # \_\_\_\_\_  
E-mail address: \_\_\_\_\_
5. Name of owner: \_\_\_\_\_ Same as Applicant  
Mailing address: \_\_\_\_\_  
Phone # \_\_\_\_\_ Fax # \_\_\_\_\_ Cell # \_\_\_\_\_  
E-mail address: \_\_\_\_\_
6. Name of contact person: \_\_\_\_\_ Lisa C. Krenkel, Esq.  
Mailing address: \_\_\_\_\_ 107 Main Street, Allenhurst, NJ 07711  
Phone # \_\_\_\_\_ 732-531-9300 \_\_\_\_\_ Fax # \_\_\_\_\_ 732-531-9317 \_\_\_\_\_ Cell # \_\_\_\_\_  
E-mail address: \_\_\_\_\_ lisa@krenkellaw.com \_\_\_\_\_
7. Interest of applicant, if other than owner: \_\_\_\_\_ N/A \_\_\_\_\_

**Detailed Information:**

- Existing use of property: Single Residential Home - Non Conforming
- Proposed use of property: Single Residential Home - Non Conforming
- Special Flood Hazard Area: N/A

**Principal Use:**

	Required and/or Permitted	Existing	Proposed
Lot Size	15,000 s.f.	12,000 s.f. *	12,000 s.f. *
Lot Coverage	80%		39.4%
Building Coverage			
Building Height	1 Story	1 Story	1 Story
Front Setback			
Rear Setback			
Side Setback			
Combined Side Setback			

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

\* Existing Non- Conforming

**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 9/28/20 - Zone Denial #553463077

Result of decision driveway and fence construction - Zone Permit denied

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

Current driveway location is dangerous, difficult to exit + enter property. Also, need to remedy changes to satisfaction of the Board

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

John Deatcher

being of full age, being duly sworn according to

(Insert Applicant's Name)

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



(Original Signature of Applicant to be Notarized)

John Deatcher

(Print Name of Applicant)

Sworn and subscribed before me this

7<sup>th</sup> day of Jan, 2021

[NOTARY SEAL]

Signature of Notary Public

USA Kimber Ego

**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 Planning Board  
(Insert Planning Board or Zoning Board of Adjustment)

IN THE TOWNSHIP OF NEPTUNE, STATE OF NEW JERSEY, COUNTY OF MONMOUTH.

I/~~WE~~ JAD Group - John Deatcher, WITH MAILING ADDRESS OF  
(Insert Property Owner's Name)

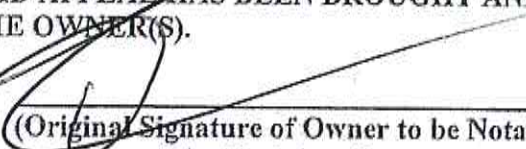
1528 Corlies Avenue OF FULL AGE BEING DULY  
(Insert Property Owner's Mailing Address)

SWORN ACCORDING TO LAW AND OATH DEPOSES AND SAYS:

"I/WE ARE THE OWNER(S) OF THE SUBJECT PROPERTY IN CONNECTION WITH  
THIS APPLICATION DESIGNATED AS BLOCK(S) 1108 LOT(S) 4  
ALSO KNOWN AS 1526 Corlies Avenue  
(Insert physical address of the subject property)

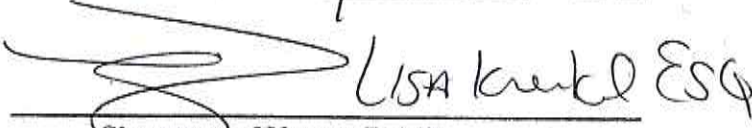
I/~~WE~~ AUTHORIZE JAD Group - John Deatcher  
(Insert name of Owner(s)' representative appearing before the Board)

TO APPEAL TO THE PLANNING/ZONING BOARD OF ADJUSTMENT OF THE TOWNSHIP OF NEPTUNE FOR SUCH RELIEF AS MAY BE REQUIRED RELATING TO THE PROPERTY LISTED ABOVE, CONSENT TO SUCH APPEAL AND APPLICATION, AND AGREE THAT ANY DECISION OF THE PLANNING/ZONING 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 Owner to be Notarized)  
John Deatcher, Owner

\_\_\_\_\_  
(Original Signature of Owner to be Notarized)

Sworn and subscribed before me this  
7<sup>th</sup> day of Jan, 2021

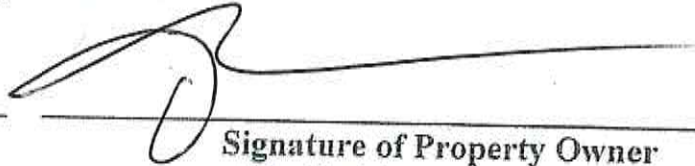
  
\_\_\_\_\_  
Signature of Notary Public

[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: 1/7/21



Signature of Property Owner  
John Deatcher

STATEMENT FROM TAX COLLECTOR

Block 1108 Lot 4

Property Location 1526 Corlies Avenue

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: JAD Group - John Deatcher  
[please print]

Property Address: 1526 Corlies Avenue Block 1108 Lot 4

Applicant's Name: John Deatcher  
[Print Name] [Signature of Applicant]

Owner's Name: \_\_\_\_\_  
[Print Name] [Signature of Owner]

Date: 1/6/21