

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"> <input checked="" type="checkbox"/> Applicant's name, address, telephone number, facsimile number, and e-mail address (if applicable). <input checked="" type="checkbox"/> Property Owner's name, address, telephone number, facsimile number, and e-mail address (if applicable). <input checked="" type="checkbox"/> Applicant's interest in the property. <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). <input checked="" type="checkbox"/> Street address of the property <input checked="" type="checkbox"/> Tax lot and block numbers of the property <input checked="" type="checkbox"/> Zoning District in which the property is located. <input checked="" type="checkbox"/> Description of the property <input type="checkbox"/> Description of the proposed development. <input checked="" type="checkbox"/> Type of application <input type="checkbox"/> Provide identification of subject property/properties' Special Flood Hazard Area Zone <input 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"/> Applicant/Owner to provide verification of taxes paid (this will be further verified by the Administrative Officer). <input type="checkbox"/> Executed copy of "Escrow Agreement" Part "E"
<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"> a. Twenty-five (25) copies of current signed & sealed survey, prepared by a New Jersey Licensed Professional Land Surveyor. b. Five (5) copies with initial submission and each subsequent submission for completeness review. 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.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	5. Six (6) copies of Tree Removal Application package in accordance with Section §525 (if applicable).
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input 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>750.00</u> Escrow Deposit \$ <u>1500.00</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.

Note. For: Binnetta McGhee; subject property: 245 Myrtle Ave Neptune, NJ 07728

Application for Use and/or Bulk Variances

Type of Variance Requested:

- Bulk Variance [front, side/rear setback, other] Specify To change the zoning of a 2 unit dwelling to a 4 unit dwelling
- Bulk Variance [Lot Coverage] _____
- Use Variance [proposal not permitted in zone] _____
- Appeal/Interpretation of Decision _____
- Other, Specify _____

1. Property Address: 245 Myrtle Ave, Neptune, NJ 07753
2. Block 605 Lot 8
3. Property is located in R-4 Zoning District according to the Neptune Twp. Land Ordinance.
4. Name of applicant: Rinetta McGhee
Mailing address: 1502 SPRINGWOOD AVE, Asbury Park, NJ 07712
Phone # [REDACTED] Fax # [REDACTED] Cell # [REDACTED]
E-mail address: [REDACTED]
5. Name of owner: Rinetta McGhee
Mailing address: 1502 SPRINGWOOD AVE, Asbury Park, NJ 07712
Phone # [REDACTED] Fax # [REDACTED] Cell # [REDACTED]
E-mail address: _____
6. Name of contact person: Robert Beatty
Mailing address: 1504 W. Lake Ave, Asbury Park, NJ 07712
Phone # [REDACTED] Fax # [REDACTED] Cell # [REDACTED]
E-mail address: _____
7. Interest of applicant, if other than owner: _____

Detailed Information:

- Existing use of property: residential
- Proposed use of property: residential
- Special Flood Hazard Area: _____

Principal Use:

	Required and/or Permitted	Existing	Proposed
Lot Size			No change
Lot Coverage			No change
Building Coverage			No change
Building Height			No change
Front Setback			No change
Rear Setback			No change
Side Setback			No change
Combined Side Setback			No change

(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 2002, 2020 Neptune Township

Result of decision denied

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

To change the zoning for a 2 dwelling unit to a 4 dwelling unit.

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

Rinnetta McGhee

(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.

Rinnetta McGhee
(Original Signature of Applicant to be Notarized)

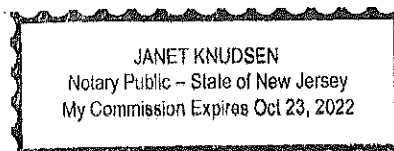
Rinnetta McGhee
(Print Name of Applicant)

Sworn and subscribed before me this

16th day of November, 2020

[Signature]

Signature of Notary Public



COMMISSION # 50070248
[NOTARY SEAL]