

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*** [C = Complete I = Incomplete N/A = Not Applicable W = Waiver Requested*]
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.
 - Property Owner's name, address, telephone number, facsimile number and e-mail address.
 - Applicant's interest in the property.
 - Name, address, telephone number, facsimile number and e-mail address of the Applicant's attorney (if represented), and any and all other professional representatives.
 - Street address of property under consideration.
 - Tax Block and Lot numbers of property.
 - Zoning District in which property is located.
 - Description of the property.
 - Description of the proposed development.
 - Type of application (i.e., Use Variance or Bulk Variance).
 - Identification of subject property's 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.
 - Verification of taxes paid (this will be further verified by the Administrative Officer).
 - Executed copy of "Escrow Agreement" Part E.
2. **Twenty-five (25) copies of the property deed(s).**
3. **Twenty-five (25) copies of the Zoning Permit denial.**
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.
- a. **Twenty-five (25) copies of current signed & sealed survey, prepared by a New Jersey Licensed Professional Land Surveyor.**
- b. **Five (5) copies of site plans/construction plans with initial submission and with each subsequent submission, for completeness review.**
- c. **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.**
5. **Six (6) copies of Tree Removal Application package in accordance with §525 (if applicable).**
6. **Community Impact Statement (for Use Variance only).**
7. **Application Fee \$ 100.00 Escrow Deposit \$ 200.00 in accordance with schedule.**
PLEASE NOTE: Application Fee and Escrow Deposit must be paid in separate checks.

*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:** The Applicant requests the following variances:
As to Principal building: Minimum lot width of 64.6 ft. proposed, whereas 100 ft. is required; minimum lot frontage of 73.3 ft. proposed, whereas 100 ft. is required; each side yard setback of 3.7 ft. proposed, whereas 10 ft. is required; and, combined side yard setbacks of 18 ft. whereas 25 ft. is required.
As to Accessory building: Side yard of 0 ft. proposed whereas 5 ft. is required
- Bulk Variance (lot coverage):** _____
- Use Variance (proposal not permitted in zone):** _____
- Appeal/Interpretation of Decision:** _____
- Other - Specify:** _____

1. **Property Address:** 618 Wayside Road
2. **Block:** 1904 **Lot:** 15
3. **Property is located in** R-2 **Zoning District, according to Neptune Township Land Development Ordinance.**
4. **Name of Applicant:** Hilmar Perez-Guzman
Mailing Address: c/o Jennifer S. Krimko, Esq., 1500 Lawrence Avenue, Ocean, NJ 07712
Phone #: (732) 922-1000 **Fax #:** _____ **Cell #:** _____
E-mail Address: JKrimko@ansell.law
5. **Name of Owner:** Same as Applicant
Mailing Address: _____
Phone #: _____ **Fax #:** _____ **Cell #:** _____
E-mail Address: _____
6. **Interest of Applicant, if other than Owner:** _____
7. **Name of Contact Person:** Jennifer S. Krimko, Esq.
Mailing Address: 1500 Lawrence Avenue, Ocean, NJ 07712
Phone #: (732) 922-1000 **Fax #:** _____ **Cell #:** _____
E-mail Address: JKrimko@ansell.law
8. **Applicant's Attorney:** Jennifer S. Krimko, Esq. **Company:** Ansell Grimm & Aaron PC
Mailing Address: 1500 Lawrence Avenue, Ocean, NJ 07712
Phone #: (732) 922-1000 **Fax #:** _____ **Cell #:** _____
E-mail Address: JKrimko@ansell.law
9. **Applicant's Engineer:** David H. Boesch, L.L.A. **Company:** Nelson Engineering Associates, Inc.
Mailing Address: 444 Neptune Boulevard, Suite 4, Neptune, NJ 07753
Phone #: (732) 918-2180 **Fax #:** _____ **Cell #:** _____
E-mail Address: dboesch@nelsoneng.net
10. **Applicant's Architect:** David Ziobro Architect **Company:** _____
Mailing Address: 74 Hawkins Road, Manalapan, NJ 07726
Phone #: (908) 494-2546 **Fax #:** _____ **Cell #:** _____
E-mail Address: Davidziobro74@gmail.com
11. **Applicant's Surveyor:** Daren C. Leeper **Company:** Leeper Land Group
Mailing Address: 767 Brunswick Pike, Lambertville, NJ 08530
Phone #: (609) 571-3955 **Fax #:** _____ **Cell #:** _____
E-mail Address: info@leepergroup.com
12. **Applicant's Planner:** N/A **Company:** _____
Mailing Address: _____
Phone #: _____ **Fax #:** _____ **Cell #:** _____
E-mail Address: _____



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

Existing use of property: Nonconforming detached single-family residence
 Proposed use of property: Nonconforming detached single-family residence
 Special Flood Hazard Area: No

PRINCIPAL USE: See Zoning Table on Plot Plan

	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.)

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.):

To be provided through testimony at hearing

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.

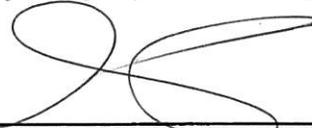
AFFIDAVIT OF APPLICATION

State of New Jersey
County of Monmouth

Hilmar Perez-Guzman _____, being of full age, being duly sworn according to Law, on oath

(INSERT APPLICANT'S NAME)

deposes and says that all the above statements are true.



(ORIGINAL SIGNATURE OF APPLICANT TO BE NOTARIZED)

Hilmar Perez-Guzman _____

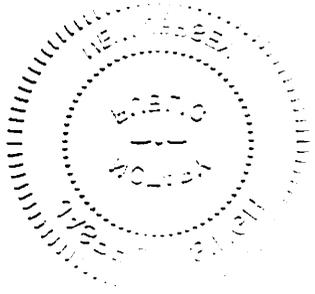
(PRINT NAME OF APPLICANT)

Sworn and subscribed before me this

10th day of November, 20 25



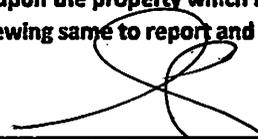

(SIGNATURE OF NOTARY PUBLIC)



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: 11/10/25



(SIGNATURE OF PROPERTY OWNER)
Hilmar Perez-Guzman

STATEMENT FROM TAX COLLECTOR

Block: 1904 Lot: 15

Property location: 618 Wayside Road

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: Hilmar Perez-Guzman
(PLEASE PRINT)

Property Address: 618 Wayside Road

Block: 1904 Lot: 15

Applicant: Hilmar Perez-Guzman
(PRINT NAME)

[Signature]
(SIGNATURE OF APPLICANT)

Date: 11/10/25

Owner: Hilmar Perez-Guzman
(PRINT NAME)

[Signature]
(SIGNATURE OF OWNER)

Date: 11/10/25