

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 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: <input type="checkbox"/> Applicant's name, address, telephone number, facsimile number and e-mail address. <input type="checkbox"/> Property Owner's name, address, telephone number, facsimile number and e-mail address. <input 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 type="checkbox"/> Street address of property under consideration. <input type="checkbox"/> Tax Block and Lot numbers of property. <input type="checkbox"/> Zoning District in which property is located. <input type="checkbox"/> Description of the property. <input type="checkbox"/> Description of the proposed development. <input type="checkbox"/> Type of application (i.e., Use Variance or Bulk Variance). <input type="checkbox"/> Identification of subject property's 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"/> 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.
<input checked="" 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. 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.
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	5. Six (6) copies of Tree Removal Application package in accordance with §525 (if applicable).
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	6. Community Impact Statement (for Use Variance only).
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	7. Application Fee \$ _____ Escrow Deposit \$ _____ 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: _____
- Bulk Variance (lot coverage): _____
- Use Variance (proposal not permitted in zone): Expansion of pre-existing non-conforming use-expanding platforms & porches.
- Appeal/Interpretation of Decision: _____
- Other - Specify: _____

1. Property Address: 34 Ocean Pathway, Ocean Grove, NJ 07756
2. Block: 129 Lot: 6
3. Property is located in HD-0 Zoning District, according to Neptune Township Land Development Ordinance.
4. Name of Applicant: 34 OPOG, LLC - Ronald Rudolph, Managing Member
 Mailing Address: 34 Ocean Pathway, Ocean Grove, NJ 07756
 Phone #: _____ Fax #: _____ Cell #: _____
 E-mail Address: _____
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: Christopher L. Beckman, Esq.
 Mailing Address: 47 Main Avenue, Ocean Grove, NJ 07756
 Phone #: 732-774-8262 Ext 108 Fax #: 732-774-6989 Cell #: _____
 E-mail Address: Christopher.L.Beckman@gmail.com
8. Applicant's Attorney: Same as Contact Company: Beckman Law Firm, LLC
 Mailing Address: _____
 Phone #: _____ Fax #: _____ Cell #: _____
 E-mail Address: _____
9. Applicant's Engineer: Landmark Surveying & Engineering Company: _____
 Mailing Address: 813 Main Street, Avon By the Sea, NJ 07717
 Phone #: 732-775-8558 Fax #: 732-775-7848 Cell #: _____
 E-mail Address: LandmarkKse@optimum.net
10. Applicant's Architect: Mark Paulin, AIA/CID/NCARB Company: The Architect's Studio
 Mailing Address: 77 Main Avenue, Suite 101, Ocean Grove, NJ 07756
 Phone #: _____ Fax #: _____ Cell #: _____
 E-mail Address: MPAIA@aol.com
11. Applicant's Surveyor: Same as Engineer Company: _____
 Mailing Address: _____
 Phone #: _____ Fax #: _____ Cell #: _____
 E-mail Address: _____
12. Applicant's Planner: N/A - TBD Company: _____
 Mailing Address: _____
 Phone #: _____ Fax #: _____ Cell #: _____
 E-mail Address: _____

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

Existing use of property: Non-Conforming 39 Room Hotel with 1 apartment for manager.
 Proposed use of property: Same - unchanged
 Special Flood Hazard Area: Flood Zone X

PRINCIPAL USE:

	REQUIRED and/or PERMITTED	EXISTING	PROPOSED
LOT SIZE	1,800 SF	5,134.2 SF	No Change
LOT COVERAGE	90%	4,623.0 SF	4,499.7 SF (87.69%)
BUILDING COVERAGE	85%	2,895.0 SF	2,895.0 SF
BUILDING HEIGHT	50 ft	46.9 ft	46.9 ft
FRONT SETBACK	Section 413.06 D	See zoning chart	No Change
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	N/A	NA	N/A
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.):

Applicant is renovating/bringing building up to current code/
fixing numerous defects by undertaking this construction.
Expansion of the pre-existing non-conforming use does not
trigger any additional bulk variance requests.

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: 5/16/2023



(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.

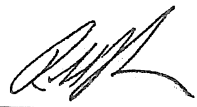
In accordance with N.J.S.A. 40:55D-53.1, all unused portion of the Escrow Account will be refunded upon written request from the Applicant, and verification by the Board's professionals who reviewed the application.

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: 34 OPOG, LLC - managing member Ronald Rudolph
(PLEASE PRINT)

Property Address: 34 Ocean Pathway, Ocean Grove, NJ 07756

Block: 129 Lot: 6

Applicant: Ron Rudolph, Managing Member 
(PRINT NAME) (SIGNATURE OF APPLICANT)

Date: 5/16/23

Owner: Ron Rudolph 
(PRINT NAME) (SIGNATURE OF OWNER)

Date: 5/16/23

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

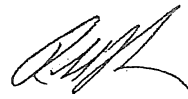
State of New Jersey
County of Monmouth

Ronald Rudolph

(INSERT APPLICANT'S NAME)

deposes and says that all the above statements are true.

, being of full age, being duly sworn according to Law, on oath



(ORIGINAL SIGNATURE OF APPLICANT TO BE NOTARIZED)

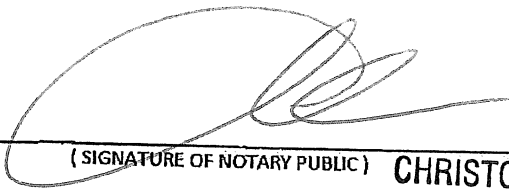
Ron Rudolph

(PRINT NAME OF APPLICANT)

Sworn and subscribed before me this

16 day of May, 2023

[NOTARY SEAL]



(SIGNATURE OF NOTARY PUBLIC)

CHRISTOPHER L. BEEKMAN, ESQ.
An Attorney at Law of NJ

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 Board of Adjustment in the Township of Neptune,
(INSERT PLANNING BOARD or BOARD OF ADJUSTMENT)

State of New Jersey, County of Monmouth, I/We, BPOG, LLC - Ronald Rudolph, Manager
(INSERT PROPERTY OWNER'S NAME[S])

with mailing address of 34 Ocean Pathway, Ocean Grove, NJ 07756,
(INSERT PROPERTY OWNER'S MAILING ADDRESS)

of full age being duly sworn according to oath depose(s) and say(s):

"I/We am/are the Owner(s) of the subject property in connection with this application

designated as Block(s) 129 Lot(s) 6,

also known as 34 Ocean Pathway, Ocean Grove, NJ 07756.
(INSERT PHYSICAL ADDRESS OF SUBJECT PROPERTY)

I/We authorize Ronald Rudolph / Chris Elizondo
(INSERT NAME OF OWNER(S)' REPRESENTATIVE APPEARING BEFORE THE BOARD)

to appeal to the Planning Board/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 the decision of the Planning Board/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 APPLICANT TO BE NOTARIZED)

(ORIGINAL SIGNATURE OF APPLICANT TO BE NOTARIZED)

Sworn and subscribed before me this

16 day of May, 2023

(SIGNATURE OF NOTARY PUBLIC)

[NOTARY SEAL]

CHRISTOPHER L. BEEKMAN, ESQ.
An Attorney at Law of NJ

