

LAND USE DEVELOPMENT APPLICATION

**BOROUGH OF BEACH HAVEN
BAY AVENUE AND ENGLÉSIDE AVE.
BEACH HAVEN, NEW JERSEY 08008
(609) 492-0111**

TO BE COMPLETED BY BOROUGH STAFF ONLY	
Date Filed _____	Docket No. _____
Application Fees _____	Escrow Deposit _____
Scheduled for: Review for Completeness _____	Hearing _____

1. SUBJECT PROPERTY - TO BE COMPLETED BY APPLICANT

Location: 325 Jefferis Avenue

Tax Map	Page _____	Block <u>40</u>	Lot(s) <u>17</u>
	Page _____	Block _____	Lot(s) _____
Dimensions Frontage	_____	Depth _____	Total Area _____
Zoning District:	_____		

2. APPLICANT

Name: Bernard Williams

Address: 1393 Mallard Drive, Martinsville, NJ 08836-2134

Telephone Number: Home: _____ Local: _____

Work: _____ Fax: _____

Applicant is a Corporation _____ Partnership _____ Individual X

Other (Please Specify) _____

3. DISCLOSURE STATEMENT

Pursuant to N.J.S. 40:55D-48.1, the names and address of all persons owning 10% of the stock in a corporate applicant or 10% interest in any partnership applicant must be disclosed. In accordance with N.J.S. 40:55D-48.2 that disclosure requirement applies to any corporation or partnership which owns more than 10% interest in the applicant followed up the chain of ownership until the names and addresses of the non-corporate stockholders and partners exceeding the 10% ownership criterion have been disclosed (Attach pages as necessary to fully comply.)

Name _____	Address _____	Interest _____
Name _____	Address _____	Interest _____

APPLICANT IS RESPONSIBLE FOR PAYMENT OF ALL PROFESSIONAL REVIEW FEES, INCLUDING THE ENGINEERING AND ATTORNEY. ALL ENGINEERING AND LEGAL FEES MUST BE PAID BEFORE CONSTRUCTION OR ZONING PERMITS CAN BE ISSUED.

4. If owner (s) is other than the applicant, provide the following information on the Owner (s):

Owner's Name _____

Address _____

Telephone Number: Home: _____ Work: _____ Local: _____

Relationship of the applicant to the property in question:

Owner: _____ Lessee _____ Purchaser Under Contract _____ Other _____

5. PROPERTY INFORMATION:

Deed restrictions, covenants, easements, rights of way, association by-laws, or other dedication existing or proposed on the property:

Yes (Attach copies) _____ No _____ Proposed _____

Note: All Deed Restrictions Covenants, Easements, Rights Of Ways Association By-Laws, or other dedications existing and proposed must be submitted for review.

Site Plan and/or conditional use applicants:

Proposal for: New structure _____ Expanded area _____ Alteration X _____

Expansion of structure X _____ Change of use _____ Sign _____

Other (please specify) _____

Has this property been the subject of any prior application (s) to the Planning Board or Zoning Board of Adjustment? Yes _____ No X _____

If so, please attach the date (s), the relief sought, the disposition of the case and a copy of the resolution (s).

Is the subject property located on:

A County road: Yes _____ No X _____ ; A State road: Yes _____ No X _____ ;
within 200 feet of a municipal boundary: Yes _____ No _____

Present use of the premises: Single Family Dwelling _____

6. Applicant's Attorney Joseph J. Bennie

Address 2 Sheppard Road, Suite 202, Voorhees, NJ 08043

Telephone Number 856-428-0200 Fax Number 856-424-4005

7. Applicant's Engineer DW Smith Associates, LLC

Address 1450 State Route 34, Wall Township, NJ 07753

Telephone Number 732-363-5850 Fax Number 732-905-8669

8. Applicant's Planning Consultant Michael J. Paparone Development Co., LLC

Address 2026 B Briggs Road, Suite 2, Mount Laurel, NJ 08054

Telephone Number 856-234-8582 Fax Number 856-273-7736

9. Applicant's Architect Holliday Architects

Address Jackson Commons, Suite A4, Medford, NJ 08055

Telephone Number 609-953-5373 Fax Number 609-953-5737

10. List any other Expert who will submit a report or who will testify for the Applicant:
(Attach additional sheets as may be necessary)

Name _____

Field of Expertise _____

Address _____

Telephone Number _____ Fax Number _____

11. APPLICATION REPRESENTS A REQUEST FOR THE FOLLOWING:

SUBDIVISION:

- _____ Minor Subdivision Approval
- _____ Subdivision Approval (Preliminary)
- _____ Subdivision Approval (Final)

Number of Lots to be created _____ Number of proposed Dwelling Units _____
(if applicable)

Area and Dimensions of each Proposed Lot _____

SITE PLAN:

- _____ Minor Site Plan Approval
- _____ Preliminary Site Plan Approval [Phases (if applicable) _____]
- _____ Final Site Plan Approval [Phases (if applicable) _____]
- _____ Amendment or Revision to an Approved Site Plan

Area to be disturbed (square feet) _____

Total number of proposed dwelling units _____
Request for Waiver from Site Plan Review and Approval _____
Reason for Request: _____

- INFORMAL REVIEW
- APPEAL DECISION OF AN ADMINISTRATIVE OFFICER [N.J.S. 40 : 55 D-70A]
- MAP OR ORDINANCE INTERPRETATION OR SPECIAL QUESTION [N.J.S. 40 : 55D-70B]
- VARIANCE RELIEF (HARDSHIP) [N.J.S. 40 : 55D-70C (1)]
- VARIANCE RELIEF (SUBSTANTIAL BENEFIT) [N.J.S. 40 : 55D-70C (2)]
- VARIANCE RELIEF (USE) [N.J.S. 40 : 55D-70D]
- CONDITIONAL USE APPROVAL [N.J.S. 40 : 55D-67]
- DIRECT ISSUANCE OF A PERMIT FOR A STRUCTURE IN BED OF A MAPPED STREET, PUBLIC DRAINAGE WAY, OR FLOOD CONTROL BASIN [N.J.S. 40: 55D-34]
- DIRECT ISSUANCE OF A PERMIT FOR A LOT LACKING STREET FRONTAGE [N.J.S. 40: 55D-35]

12. Section (s) of Ordinance from which a variance is requested:

Section 212-12
Principal Building Setback: Min Front Yard 15 feet; Proposed 13 ft
Lot Coverage: Required 35% (1400 SF); Proposed 37% (1483 SF)

13. Waivers Requested of development Standards and/or Submission Requirements: (attach additional pages as needed)

14. ATTACH A COPY OF THE PROPOSED NOTICE TO APPEAR IN THE OFFICIAL NEWSPAPER OF THE MUNICIPALITY AND TO BE MAILED TO THE OWNERS OF ALL REAL PROPERTY, AS SHOWN ON THE CURRENT TAX DUPLICATE, LOCATED WITHIN THE STATE AND WITHIN 200 FEET IN ALL DIRECTIONS OF THE PROPERTY WHICH IS THE SUBJECT OF THIS APPLICATION. THE NOTICE MUST SPECIFY THE SECTIONS OF THE ORDINANCE FROM WHICH RELIEF IS SOUGHT, IF APPLICABLE.

The publication and the service on the affected owners must be accomplished at least 10 days prior to the date scheduled by the Administrative Officer for the hearing.

15. An Affidavit of Service on all property owners and a Proof of Publications must be filed before the Application will be complete and the hearing can proceed.

Explain in detail the exact nature of the Application and the changes to be made at the premises, including the proposed use of the premises: (Attach pages needed)

Proposed for the single family dwelling located at 325 Jefferis Avenue is a front elevation addition and deck modifications to permit installation of a residential elevator system. The 1st and 2nd floor building lines are to be extended to the existing deck line above the garage door. The Proposed deck from the architectural plans will then match the existing deck's ultimate front line at a setback of 15.0' from the front lot line. The proposed deck will match the width of the house at 24.0.' Applicant, se set forth in Appendix A, is seeking this variance to permit an additional 2.0' in depth into the front yard setback as well as the resulting increased lot coverage. These modifications are necessary for the needs of the homeowner with health and mobility complications to have full unobstructed use of his property by enabling the installation of an elevator and associated required improvements to support his needs.

16. Is a public water line available? YES
17. Is a public sanitary sewer available? YES
18. Does the applicant propose any lighting? _____
19. Have any proposed new lots been reviewed with the Tax Assessor to determine appropriate Lot and Block number? YES
20. Are any Off-Tract Improvements required or proposed? _____
21. Is the Subdivision to be filed by Deed or Plat? _____
22. What form of security does the applicant propose to provide as performance and maintenance guarantees? _____

23. OTHER APPROVALS WHICH MAY BE REQUIRED AND DATE PLANS SUBMITTED:

	YES	NO	DATE PLANS SUBMITTED
LOCAL FIRE PREVENTION	_____	_____	_____
BEACH HAVEN WATER & SEWER DEPT.	_____	_____	_____
BEACH HAVEN PUBLIC WORKS DEPT,	_____	_____	_____
LONO BEACH ISLAND HEALTH DEPT.	_____	_____	_____
OCEAN COUNTY PLANNING BOARD	_____	_____	_____
OCEAN COUNTY SOIL CONSERVATION DEPT	_____	_____	_____
N.J. DEPT. ENVIRONMENTAL PROTECTION	_____	_____	_____

	YES	NO	DATE PLANS SUBMITTED
<input type="checkbox"/> SANITARY SEWER CONNECTION PERMIT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> SEWER EXTENSION PERMIT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> WATERFRONT DEVELOPMENT PERMIT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> WETLANDS PERMIT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> TIDAL WETLANDS PERMIT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> R.E.M.A.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> N.J. DEPT. OF TRANSPORTATION	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> ATLANTIC ELECTRIC	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> N.J. NATURAL GAS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> OTHER _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> OTHER _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

24. CERTIFICATION FROM THE TAX COLLECTOR THAT ALL TAXES DUE ON THE SUBJECT PROPERTY HAVE BEEN PAID.

25. LIST OF MAPS, REPORTS AND OTHER MATERIALS ACCOMPANYING THE APPLICATION (ATTACH ADDITIONAL PAGES AS REQUIRED FOR COMPLETE LISTING)

THE DOCUMENTATION MUST BE RECEIVED THE BOARD SECRETARY AT LEAST TWENTY-ONE [21] DAYS PRIOR TO THE MEETING AT WHICH THE APPLICATION IS TO BE CONSIDERED. A LIST OF THE PROFESSIONAL CONSULTANTS IS ATTACHED TO THE APPLICATION FORM.

Quantity	Description of Item
_____	_____
_____	_____
_____	_____

26. THE APPLICANT HEREBY REQUESTS THAT COPIES OF THE REPORTS OF THE PROFESSIONAL STAFF REVIEWING THE APPLICATION PROVIDED TO THE FOLLOWING OF THE APPLICANT'S PROFESSIONALS:

SPECIFY WHICH REPORTS ARE REQUESTED FOR EACH OF THE APPLICANT'S PROFESSIONALS OR WHETHER ALL REPORTS SHOULD BE SUBMITTED TO THE PROFESSIONAL LISTED.

	Applicant's Professional	Reports Requested
<input checked="" type="checkbox"/>	Attorney	All
<input checked="" type="checkbox"/>	Engineer	All
_____	_____	_____
_____	_____	_____

27. CHECK LISTS USED

SCHEDULE A	<input type="checkbox"/> YES	<input type="checkbox"/> NO
SCHEDULE B	<input type="checkbox"/> YES	<input type="checkbox"/> NO
SCHEDULE C	<input type="checkbox"/> YES	<input type="checkbox"/> NO

CERTIFICATIONS

28. I CERTIFY THAT THE FOREGOING STATEMENTS AND THE MATERIALS SUBMITTED ARE TRUE, AND WAIVE ALL APPLICABLE TIME LIMITS UNTIL THE FIRST PUBLIC HEARING OF THIS APPLICATION. I FURTHER CERTIFY THAT I AM THE INDIVIDUAL APPLICANT OR THAT I AM AN OFFICER OF THE CORPORATE APPLICANT AND THAT I AM AUTHORIZED TO SIGN THE APPLICATION FOR THE

CORPORATION OR THAT I AM A GENERAL PARTNER OF THE PARTNERSHIP APPLICANT. (IF THE APPLICANT IS A CORPORATION, THIS MUST BE SIGNED BY AN AUTHORIZED CORPORATE OFFICER. IF THE APPLICANT IS A PARTNERSHIP, THIS MUST BE SIGNED BY A GENERAL PARTNER.)

SIGNATURE OF APPLICANT

Bernard L. Williams

SIGNATURE OF OWNER

29. I UNDERSTAND THAT A SUM, TO BE DETERMINED BY THE
WILL BE DEPOSITED IN AN ESCROW ACCOUNT, IN
ACCORDANCE WITH THE ORDINANCES OF THE BOROUGH OF BEACH HAVEN. I FURTHER UNDER-
STAND THAT THE ESCROW ACCOUNT IS ESTABLISHED TO COVER THE COST OF PROFESSIONAL
SERVICES INCLUDING ENGINEERING, PLANNING, LEGAL AND/OR OTHER EXPENSES ASSOCIATED
WITH THE REVIEW OF SUBMITTED MATERIALS. SUMS NOT UTILIZED IN THE REVIEW PROCESS
SHALL BE RETURNED. IF ADDITIONAL SUMS ARE DEEMED NECESSARY, I UNDERSTAND THAT I
WILL BE NOTIFIED OF THE REQUIRED ADDITIONAL AMOUNT AND SHALL ADD THAT SUM TO THE
ESCROW ACCOUNT WITHIN FIFTEEN (15) DAYS.

DATE

Bernard L. Williams

SIGNATURE OF OWNER OR APPLICANT

BOROUGH OF BEACH HAVEN PROFESSIONAL CONSULTANTS

LAND USE BOARD ATTORNEY

Stuart Snyder, Esquire
2100 Long Beach Blvd.
Surf City, NJ 08008

(609)494-7676
FAX (609)494-8499

ENGINEER

Frank J. Little, Jr., P.E., P.P.
Owen, Little & Associates
443 Atlantic City Blvd.
Beachwood, NJ 08722

(732)244-1090
FAX (732)341-3412

BOROUGH ATTORNEY

Richard Shackleton, Esquire
22nd St. and Long Beach Blvd.
Ship Bottom, NJ 08008

(609)494-2136
FAX (609)494-0870