BOROUGH OF POINT PLEASANT Zoning Board of Adjustment 2233 Bridge Avenue Point Pleasant, New Jersey 08742 732-892-3447 Fax: 732-899-2655 Email: Zonesecretary@ptboro.com

VARIANCE APPLICATION FORM

See the Development Application Instructions & Filing Procedures for detailed instructions on completing this application. This application, together with the required fee, attachments and supporting documentation, must be filed with the Board Clerk not later than ten (10) days prior to your scheduled Board meeting date, or you will forfeit your hearing date. Dated Filed: _____ Application No.: Fee: Received By:_____ APPLICANT INFORMATION Applicant Name: Address: City, State, & Zip: Telephone: (____) ____ Fax: (____) ____ Email If the Applicant is not the Property Owner, the PROPERTY OWNER AUTHORIZATION section must be completed. Applicant is: Contract Purchaser DOther: □Property Owner □Tenant PROPERTY OWNER AUTHORIZATION. If the Applicant is not the property owner, provide the following information: Property Owner Name:_____ Address: City: _____ State____ Zip Code_____ Phone Number:_____ Fax Number: _____ Email _____

□Individual	□Corporation □Partnership □Other:
If the Applican	t is a corporation or partnership, the names and address of all stockholders
or partners ow	ning a 10% or greater percentage/interest in said corporation or partnership
shall be set for	th below in accordance with P.L 1977 Ch. 336:

Name	Addre	ess	Percentage/Interest
1			
2			
ATTORNEY NAME (if ap	-		
Firm:			
Address:			
			Zip Code:
Phone Number:		Fax Number:	
Email			
APPLICANT'S EXPERTS			
ARCHITECT			
Name:			
Street/Mailing Address:			
City:	State: _		Zip Code:
Phone Number:		Fax Number: _	
Email			

<u>ENGINEER</u>			
Name:			
Firm:			
Street/Mailing Address:			
City:	State:		_Zip Code:
Phone Number:		_ Fax Number:	
Email			
PROFESSIONAL PLANNER	-		
Name:			
Firm:			
Street/Mailing Address:			
City:	State:		_ Zip Code:
Phone Number:		_ Fax Number:	
Email			
OTHER EXPERT (Traffic Ex	cperts, Radio F	requency Enginee	r)
Name:			
Firm:			
Street/Mailing Address:			
City:	State:		_ Zip Code:
Phone Number:		_ Fax Number:	
Email			

Applic	cation is here	by made f	or relief in	n accordance wit	h either N.J.	S.A. 40:	55D(a), (b),
(c) or	(d) from Sect	ions	of	f the Zoning Ord	inance so as	to permi	it: (Set forth
the	reasons	why	this	application	should	be	granted).

PROPOSAL INFORMATION

Summarize the proposed physical changes and use of the property.

PROPERTY INFORMATION

Street Address:				
Block:	Lot:			
Lot Dimensions (feet):	Lot Area (square feet):			
Corner Lot: \Box Yes \Box No				
Irregular Shaped Lot: \Box Yes \Box N	lo			
Undersized Lot: \Box Yes \Box NO				
Zoning District: □ R-1 □ R-1A	\square R-3 \square RM \square NC \square GC \square CM			
$\Box \ \mathrm{TC} \ \Box \ \mathrm{W} \ \Box \ \mathrm{R}$	$M/POS \square Other$			
Number of Buildings (including garages and storage sheds):				
Swimming Pool: \Box Yes \Box No				
Other structures:				
(All structures must be shown on	the attached drawing, plan or survey).			

	 Vacant Single Family Residence Multi-Family Residence Number of Dwelling Units: Commercial Number of Units:
	Total Gross Floor Area (square feet): □ Hotel, Bed & Breakfast Number of Dwelling Units (including efficiencies): Number of Rooms: □ Other, please specify:
Proposed Us	se:
□Yes □No	Is the entire lot to be utilized for the purpose hereinafter set forth? If yes, please provide the dimensions of the portion of the lot to be utilized:
□Yes □No	Does the proposal increase the present number of uses or dwelling units located on the property or within any building?
For each stru	cture on the lot, what year was it constructed?
Please list the	e total proposed parking spaces (if applicable):

□Yes □ No Have there been any previous appeals, requests or applications to this or any other Borough Boards or the Construction Official involving these premises? If yes, state the nature, date and the disposition of said matter and include a copy of the previous resolution, if applicable.

□Yes □No Are there any deed restrictions, covenants or easements that have been recorded affecting this property, except for utility easements? If so, copies of these must be attached.

□Yes □No Does the Applicant own any adjacent property?
□ Yes □ No Is any adjacent property vacant?

What are the EXCEPTIONAL conditions, as defined by <u>N.J.S.A.</u> 40:55D-70(c)(1) of property preventing applicant from meeting the Zoning Ordinances?

Set forth any and all special reasons as defined by the purposes of zoning pursuant to $\underline{N.J.S.A.}$ 40:55D-2, supporting the granting of the variances:

Supply a statement of facts showing why relief can be granted without substantial detriment to the public good and without substantially impairing the intent and purpose of the Master Plan or Zoning Ordinance:

I certify that all property taxes have been paid through ______ on the premises. Please attach a copy of any photograph or photographs, which may be utilized at the time of the hearing.

LOT INFORMATION

Required/Allowed	Existing	Proposed
------------------	----------	----------

Lot Width		
(in feet)		
Lot Depth		
(in feet)		
Lot Area		
(in square feet)		

BUILDING INFORMATION (IF NOT A CORNER LOT)

	Required/Allowed	Existing	Proposed
Front Yard Setback			
(in feet)			
Read Yard Setback			
(in feet)			
Side Yard Setback			
#1 (in feet)			
Side Yard Setback			
#2 (in feet)			
Building Height			
(in feet)			
Building Stories			
Impervious			
Coverage (*in			
percentage)			
Building Coverage			
(*in percentage)			

BUILDING INFORMATION (CORNER LOTS <u>ONLY</u>)

	Required/Allowed	Existing	Proposed
Front Yard Setback			

#1 (in feet)		
Front Yard Setback		
#2		
(in feet)		
Side Yard Setback		
#1 (in feet)		
Rear Yard Setback		
(in feet)		
Building Height		
(in feet)		
Building Stories		
Impervious		
Coverage (*in		
percentage)		
Building Coverage		
(*in percentage)		

ACCESSORY STRUCTURE (IF APPLICABLE)

	Required/Allowed	Existing	Proposed
Front Yard Setback			
(in feet)			
Side Yard Setback			
#1 (in feet)			
Side Yard Setback			
#2 (in feet)			
Rear Yard Setback			
(in feet)			
Building Height			
(in feet)			

ON-SITE PARKING INFORMATION

	Required/Allowed	Existing	Proposed
Parking Spaces			

APPLICATION ATTACHMENTS Please check all items which are attached to the Application

□ Application Fee & Escrow Deposit

Application Fee: \$_____ Escrow Fee: \$_____

- □ Architectural Elevations and Floor Plan
- □ Certified Property Survey
- □ Environmental Impact Report (Site Plan Applications)
- \Box Photos of Property
- □ Plot Plan
- □ PDF Submission of Application and Plans
- □ Site Plan (Site Plan Applications)
- $\hfill\square$ Subdivision Plans
- □ Tax Collector Certification
- □ Zoning Officer Denial (For Variance Applications or Zoning Officer Appeal)

Subject to applicable penalties, I hereby certify that statements and information submitted with this application are true; all surveys, plot plans and drawings accurately reflect the current conditions of the subject property, and I am the owner of the property, which is the subject of the within application, and that said application is hereby authorized.

Date:_____

Signature of Property Owner or Authorized Agent

REVIEW FEE ESCROW AGREEMENT & APPLICANT CERTIFICATION

Subject to applicable penalties, it is hereby certified the foregoing statements and information with this application are true and that all surveys, plot plans and drawings accurately reflect the current conditions of the subject property. It is further certified the undersigned is the applicant, a general partner of a partnership applicant or an authorized agent of a corporate application.

CHECK IF APPLICABLE: \Box

I hereby certify the plans and specifications which accompany this application were prepared by me, as I am acting as the designer of said building/alteration which is to be constructed by myself for my own occupancy or occupancy by my immediate family. The phase "constructed by myself" does not mean that I intend to personally do the work but that I am the person undertaking the work as owner and principal.

In accordance with §19-20 (Schedule of Fees) of the Borough of Point Pleasant Land Use Ordinance, the applicant agrees to pay an amount equal to the fee(s) which the Zoning Board of Adjustment pays to a Professional Engineer or Planner to review the Development Application and agrees to pay an initial deposit and such other additional deposits as may be required to offset these special review costs by the Zoning Board of Adjustment. The Zoning Board of Adjustment shall not be required to process the application or take further action on the application until such additional deposits are made by the applicant. In the event that additional deposits requested by the Zoning Board of Adjustment remain unpaid for a period of sixty (60) days, this development application shall be deemed to be withdrawn and shall be dismissed without prejudice by the Zoning Board of Adjustment. In the event the fees imposed are not paid, any development approvals granted shall be considered null and void.

Sworn and subscribed before me this ____ day of _____, 20

NOATRY PUBLIC STATE OF NEW JERSEY Signature of Applicant or Authorized Agent