

APPLICATION TO THE KEYPORT UNIFIED PLANNING BOARD

1. SUBJECT PROPERTY

Location: 108 Broad Street

Tax Map: Block 60 Lot(s) 6

Dimensions: Frontage	59	Depth	87.5	Total Area	5,162.5
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Zone District: **RB Residential District B**

Location of the property is approximately 0 feet from the intersection of West Third Street

The property is located within 200 feet of another municipality: X NO YES

If yes, name of municipality

The property fronts on a County Road or State Hwy: NO ☒ YES

COUNTY ROUTE NO. 4 STATE HWY NO.

2. APPLICANT INFORMATION

Full Legal Name: Arjika Property, Inc.

Address: 8 Strawberry Lane, Monroe Township, New Jersey 08831

Telephone Numbers: DAY 732-558-1928 EVENING

Applicant is a: ☒ Corporation ☐ Partnership ☐ Sole Proprietor ☐ Resident

3. OWNER IF DIFFERENT FROM APPLICANT

If the owner of the property is someone different from the Applicant, then please complete the following:

Owner's Name: _____

Address: _____

(Street) (City) (State) (Zip)

Telephone Numbers: DAY EVENING

4. ADDITIONAL PROPERTY INFORMATION

Restrictions, covenants, easements, homeowners/condo association by-laws, existing or proposed on the property:

___ YES (attach copies and/or copy of deed) ___ PROPOSED (attach description) X NONE

NOTE: All Deeds Restrictions, covenants, easements, association by-laws, either existing or proposed, must be submitted for review, and must be written in easily understandable English in order to be approved.

Present use of the premises and proposed use (describe in detail): _____

5. APPLICANT'S EXPERTS / REPRESENTATIVES

Applicant Attorney: F. Bradford Batcha, Esq. Batcha & Batcha, PC
(Name and Firm if Applicable)

Address: 600 Broad Street, Shrewsbury, New Jersey 07702
(Street) (City) (State) (Zip)

Telephone: 732-747-8300 Fax 732-747-8180 brad@batchalaw.com

Applicant Engineer: East Point Engineering, LLC - Marc S. Leber, PE, PP
(Name and Firm if Applicable)

Address: 11 South Main Street, Marlboro, New Jersey 07746
(Street) (City) (State) (Zip)

Telephone: 732-577-0180 Fax _____

Applicant Planning Consultant: Patrick Ward, PE, PP, Insite Engineering, LLC
(Name and Firm if Applicable)

Address: 1955 Route 34, Suite 1A, Wall, New Jersey 07719
(Street) (City) (State) (Zip)

Telephone: 732-531-7100 Fax 732-531-7344

Applicant Traffic Engineer: _____
(Name and Firm if Applicable)

Address: _____
(Street) (City) (State) (Zip)

Telephone: _____ Fax _____

6. OTHER EXPERTS

List any other expert(s) who will submit a report and/or testify on behalf of the Applicant.

Name: _____ Field of Expertise: _____

Address: _____
(Street) (City) (State) (Zip)

Telephone: _____ Fax _____

7. RELIEF BEING REQUESTED

SUBDIVISION APPROVAL

_____ Minor Subdivision

_____ Major Subdivision

_____ Major Subdivision – Final

_____ Number of Lots to be Created

_____ Number of Proposed Dwelling Units

Note: A "Plan of Subdivision" must be submitted in accordance with the submission requirements set forth in the Submission Checklist and the Borough of Keyport Ordinance.

SITE PLAN APPROVAL

_____ Major Site Plan Approval ☒ Minor Site Plan Approval

_____ Preliminary Site Plan Approval (phases – if applicable) _____

_____ Final Site Plan Approval (phases – if applicable) _____

_____ Amendment or Revision to an Approval Site Plan (Area to be disturbed – square feet)

_____ Request for a Waiver from Site Plan Review and Approval. Reason for Request: _____

OTHER

_____ Informal Review of _____

_____ Appeal Decision of the Zoning Officer (N.J.S.A. 40:55D-70.a.) Describe nature of appeal: _____

_____ Interpretation of Map or Ordinance, or Decisions upon Special Questions (N.J.S.A. 40:55D 70.b.) Explain: _____

_____ Variance Relief-Hardship (N.J.S.A. 40:55D-70c (1)) Provide Reasons: _____

_____ Variance Relief-Substantial Benefit (N.J.S.A. 40:55D-70c (2)) Provide Reasons: _____

 X Variance Relief-Use (N.J.S.A. 40:55D-70cd) Provide Reasons: _____

	<u>EXISTING</u>	<u>PROPOSED</u>	<u>REQUIRED</u>
Minimum lot area:*	_____	_____	_____
Building coverage limit:*	_____	_____	_____
Front yard setback:*	_____	_____	_____
Side yard setback:*	_____	_____	_____
Rear yard setback:*	_____	_____	_____
Roadway setback:	_____	_____	_____
Impervious coverage limit:	_____	_____	_____
Parking spaces:*	_____	_____	_____
Building height:*	_____	_____	_____

*DENOTES ITEMS REQUIRED ON THE SITE PLAN.

7. SUBMISSION REQUIREMENTS

The Applicant is required to submit each of the following, unless otherwise noted:

- A. Application: An Original and nineteen (19) copies to the Board Secretary (Total 20) must be submitted (with attached site plan, plot plan, survey and/or other pertinent documents).
- B. Escrow Agreement (Form #1): Sign and submit with original copy of application
- C. Notice of Public Hearing (Form #2): DO NOT MAIL TO PROPERTY OWNERS UNTIL AUTHORIZED TO DO SO BY THE BOARD'S SECRETARY. Submit a draft copy (leaving date of hearing blank) and submit with original application. *(Not required for minor subdivision where no variances are requested)*
- C. Affidavit of Publication – Asbury Park Press: Evidencing that the Notice of Public Hearing (Form #3) was published at least ten (10) days prior to the hearing date: (DO NOT PUBLISH NOTICE IN NEWSPAPER UNTIL AUTHORIZED TO DO SO BY THE BOARD'S SECRETARY) Submit to the Board's Secretary as soon as received by the newspaper. *(Not required for minor subdivision where no variances are requested)*
- D. Affidavit of Service – with attachments (Form #4). Submit to the Board's Secretary along with Original copies of Certified Mail Receipts stamped by the US Post Office as to the date of mailing, and a copy of the Notice of Public Hearing (Form #2) with hearing date.
- E. Tax Payment Certification (Form #5). Submit with Original copy of Application.

8. **OTHER APPROVALS, WHICH MAY BE REQUIRED, AND THE DATES THAT PLANS/APPLICATIONS WERE SUBMITTED:**

AGENCY OR PERMIT	YES	NO	DATE PLANS SUBMITTED
Borough of Keyport Health Dept	_____	_____	_____
Borough of Keyport Planning Board	_____	_____	_____
Freehold Soil Conservation District	_____	_____	_____
NJ Dept. of Transportation	_____	_____	_____
JCP&L	_____	_____	_____
Other: _____	_____	_____	_____

*NJ Dept of Environmental Protection

*Check nature of approval(s) needed on next page:

_____ Sewer Extension Permit; _____ Sanitary Sewer Connection Permit; _____ Potable Water Construction Permit;
_____ Stream Encroachment Permit; _____ Wetlands Permit; _____ Tidal Wetlands Permit; _____ Other _____

List of Maps, Reports and other materials accompanying this application (attach additional pages as required for complete listing): _____

9. OTHER INFORMATION ATTACHED IN SUPPORT OF YOUR APPLICATION.
(List specific information attached and its importance/significance to your application): _____

10. CERTIFICATIONS

APPLICANT

I certify that the foregoing statements and the materials submitted are true. I further certify that I am the individual applicant or that I am an Officer of the Corporate applicant 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 application must be signed by an authorized corporate officer as indicated in a resolution of the corporation which must be attached hereto. If the applicant is a partnership, this must be signed by a general partner).

Sworn to and subscribed before me this

_____ day of _____, 20____

NOTARY PUBLIC

X _____
SIGNATURE OF APPLICANT

Applicant's Name (Print)

OWNER (IF DIFFERENT FROM APPLICANT)

I certify that I am the Owner of the property which is the subject of this application, that I have authorized the applicant to make this application and that I agree to be bound by the application, the representations made by the applicant, and the decision of the Board in this matter.

Sworn to and subscribed before me this

_____ Day of _____, 20____

NOTARY PUBLIC

X _____
SIGNATURE OF OWNER

Owner's Name (Print)