

City of Somers Point

DEPARTMENT OF PLANNING & ZONING

A CURRENT, TO SCALE, PROPERTY SURVEY PREPARED AND SEALED BY A LICENSED LAND SURVEYOR, MUST BE SUBMITTED WITH EVERY APPLICATION TO THE ZONING BOARD OF ADJUSTMENT. ALL PROPOSED ADDITIONS, ALTERATION, ETC. TO THE PROPERTY MUST BE DRAWN, TO SCALE, ON THE SURVEY.. TOTAL SQUARE FOOTAGE OF THE LOT MUST BE NOTED ON THE SURVEY.

THE FOLLOWING ITEMS MUST BE COMPLETED AND SUBMITTED WITH EACH APPLICATION BEFORE IT WILL BE DEEMED COMPLETE:

AN ORIGINAL APPLICATION FOR SOMERS POINT ZONING BOARD OF ADJUSTMENT ALONG WITH 12 COPIES.

12 COPIES OF THE SURVEY SHOWING THE ADDITIONS/ALTERATIONS

12 COPIES OF THE LIST OF PROPERTY OWNERS WITHIN 200' (CONTACT THE TAX COLLECTOR'S OFFICE, CITY HALL, TO OBTAIN LIST 609 927-9088 X 126)

12 COPIES OF THE 200' TAX MAP, OUTLINING BLOCKS/LOTS (CONTACT THE CITY ENGINEER'S OFFICE 609 365-1747 TO OBTAIN)

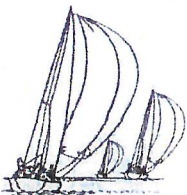
12 COPIES OF FLOOR PLANS AND ELEVATIONS

12 COPIES OF THE "REFUSAL OF PERMIT" FROM THE ZONING OFFICIAL

~~12 COPIES OF THE "DEMOLITION DECLARATION", IF APPLICABLE~~

12 COPIES OF ANY PRIOR DECISION AND RESOLUTIONS FOR THE PROPERTY

UPON REVIEW OF SUBMITTED APPLICATION, A FEE WILL BE DUE AND PAYABLE TO "CITY OF SOMERS POINT". CHECK AND CASH ACCEPTED.



"Small Town Charm on the Bay"

Somers Point Zoning Board of Adjustment Application

In the Matter of the Appeal of:

Name:

Address:

1. This application concerns Block _____, Lot _____ on the tax map of the City of Somers Point, having the following street address: _____

2. The land has frontage on _____ of _____ feet and a depth of _____ feet.

3. I have filed a Plot Plan and Survey of the premises within the Secretary of the Zoning Board of Adjustment of the City of Somers Point which may be examined at the Code Enforcement Office, 1 West New Jersey Avenue, Somers Point, New Jersey, on which Plot I have indicated existing boundary lines and structures and changes requested to be granted herein.

4. The land is in _____ zone, and the present use of the land is: _____

4a. Lot size _____ square feet.

5. I desire to make the following changes (insert how the existing use will be changed or modified): _____

6. Plan prepared by: _____

7. Type of Appeal:

- An inspection of the Zoning Ordinance Zoning Map
- A special exception to the Zoning Ordinance
- A Variance from the strict application of the Zoning Ordinance
- A Use Variance

8. I desire the Zoning Board of Adjustment to grant a Variance or a Special Use Permit (specify in detail action of the Zoning Officer)

Signature of Tax Collector

9. Set Forth in Detail, including all facts that you wish to rely on at the Hearing, why the Zoning Board should grant your application. (Application may be decided on reasons herein in the event that no one desires to be heard on the application). _____

10. State Name, Address, and Telephone number of the Attorney representing the Applicant, if any. _____

11. Set Forth any previous applications made to this Board for the above property indicating date and result. _____

12. Applicants Telephone number: Home - _____

Work - _____

SITE PLAN AND SUBDIVISION

SITE PLAN

1. Property Land Use _____

2. Density - Permitted _____

- Proposed _____

3. Percentage of Building Coverage - Permitted _____

- Proposed _____

4. Number of Parking Spaces - Required _____

- Proposed _____

5. Number of Residential Units Proposed _____

6. Square Footage of Residential Units - Permitted _____

Square Footage of Lot _____ - Proposed _____

7. Front Yard Setback - Required _____

- Proposed _____

8. Rear Yard Setback - Required _____

- Proposed _____

9. Side Yard Setback - Required N S E W (Circle One) _____

- Proposed _____

9a. Side Yard Setback - Required N S E W (Circle One) _____

- Proposed _____

10. Building Height - Permitted _____

- Proposed _____

11. Classification of Structure: One Story__Two Story__Three or More__Other_____

12. Facilities for Trash and Garbage Disposal _____

Private: Yes___ No _____

13. Buffer Zones - Describe Location and Extent Provided _____

14. Recreational Facilities Provided _____

15. If Ten (10) Units or More are Proposed, an Environmental Impact Statement is Required.

SUBDIVISION

1. Total Area of Tract _____

2. Portion being Subdivided _____

3. Number of Lots being Created _____

4. Purpose of Subdivision _____

5. Proposed Use of New Lots _____

Signature of Applicant or Representative

State of New Jersey, County of _____

Signature of Applicant or Attorney _____

Signature of Notary _____

Sworn to Me on this _____ Day of _____, 20 _____

OWNER'S CONSENT

I certify that I am the owner of the above 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 and the decision in the same manner as if I were the applicant.

By: _____

SIGNATURE OF OWNER

Print name: _____

Sworn to and subscribed before me this
_____ day of _____, 202__

NOTARY PUBLIC