

**ZONING BOARD OF ADJUSTMENT  
APPLICATION FOR USE VARIANCE AND/OR BULK VARIANCE(S)**

**Information on Subject Property:**

1. Property address: 509 Newark Ave  
Block(s) 18 Lot(s) 6 Zone: R  
2. Does the Applicant own adjoining property?  YES  NO  
If answer to foregoing is yes, describe location and size of adjoining property: \_\_\_\_\_



3. An application is hereby made for a variance(s) from the terms of Article(s) and Section(s):  
Article V 450-26 D+E  
Frontyard setback to 6'8" where 17' is required  
2 Sideyard variances to 2.48' & 3.67' where 5' is required  
Coverage requested 53.72% where 35% is allowed  
Impervious coverage requested 70.81% where 60% is allowed

4. Justification/Reasons why each variance should be granted [attach forms as necessary]  
Master bedroom needed - original house does not  
meet today's requirements

5. If conditional use is required/requested with this application, detail conformance/deviation from the requirements of the zoning ordinance [attach forms as necessary].  
\_\_\_\_\_  
\_\_\_\_\_

**Contact Information:**

6. Name of applicant: Alice Connolly  
Mailing address: 223 A N. Middletown Rd, Pearl River, NY 10965  
Phone # [REDACTED] Fax # \_\_\_\_\_ Cell # \_\_\_\_\_  
E-mail address: [REDACTED]

7. Interest of Applicant if other than owner (i.e. tenant, contract purchaser)(If applicant is not the owner, Owner(s)' Affidavit of Authorization and Consent must be completed & submitted with this application):

8. Name of present owner: Alice Connolly

Mailing address: 223 A N. Middletown Rd, Pearl River, NY 10965

Phone # [REDACTED] Fax # \_\_\_\_\_ Cell # \_\_\_\_\_

E-mail address: [REDACTED]

9. Contact Person: same as above

Mailing address: \_\_\_\_\_

Phone # \_\_\_\_\_ Fax # \_\_\_\_\_ Cell # \_\_\_\_\_

E-mail address: \_\_\_\_\_

**Applicant's Professionals' Information:**

10. Name of applicant's Attorney (if applicable)  
(Companies/Corporations must be represented): \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone # \_\_\_\_\_ Fax # \_\_\_\_\_ Cell # \_\_\_\_\_

E-mail address: \_\_\_\_\_

11. Name of applicant's Engineer (if applicable): \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone # \_\_\_\_\_ Fax # \_\_\_\_\_ Cell # \_\_\_\_\_

E-mail address: \_\_\_\_\_

12. Name of applicant's Planner (if applicable): \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone # \_\_\_\_\_ Fax # \_\_\_\_\_ Cell # \_\_\_\_\_

E-mail address: \_\_\_\_\_

13. Name of applicant's Surveyor: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone # \_\_\_\_\_ Fax # \_\_\_\_\_ Cell # \_\_\_\_\_

E-mail address: \_\_\_\_\_

14. Name of applicant's Architect (if applicable): Richard Villano  
Mailing Address: 2006 Hway 71, Suite 2, Springlake Hgts<sup>NJ</sup> 07762  
Phone # 732-282-9300 Fax # 732 282 9301 Cell # \_\_\_\_\_  
E-mail address: Richard@architectrichardvillano.com

15. Name of applicant's Other Professional (if applicable): \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
Phone # \_\_\_\_\_ Fax # \_\_\_\_\_ Cell # \_\_\_\_\_  
E-mail address: \_\_\_\_\_  
\_\_\_\_\_

**Detail Property Information:**

(PLEASE INCLUDE INFORMATION FOR EACH ZONE/BLOCK/LOT INVOLVED BELOW – ATTACH ADDITIONAL SHEETS AS NECESSARY)

<b><u>PRINCIPAL USE:</u></b>	<b><u>Required and/or Permitted</u></b>	<b><u>Existing</u></b>	<b><u>Proposed</u></b>
Minimum lot area	5000 sq ft	2,252.23 sf	no change
Minimum lot width	50'	25'	no change
Minimum lot depth	100'	91.19'	no change
Minimum lot frontage to Porch	17'	8.81	6.81' Sec Fl Add
Minimum front yard setback	25'	16.78	no change
Minimum <del>rear</del> <sup>side</sup> yard setback	5'	3.67	no change
Minimum side yard setback	5'	2.48	no change
Maximum percent building coverage	35%	52.12%	53.72%
Maximum percent lot coverage - Imperv	60%	69.85%	70.81%
Maximum number of stories			
Maximum building height (in feet)			
Square footage of principal structure			
Off-street parking spaces			
Prevailing Setback of adjacent buildings within the block/within 200 ft.			
<b><u>ACCESSORY USE/STRUCTURE:</u></b>	<b><u>Required and/or Permitted</u></b>	<b><u>Existing</u></b>	<b><u>Proposed</u></b>
Minimum front yard setback			
Minimum rear yard setback			
Minimum side yard setback			
Minimum combined side yard setback			
Maximum percent building coverage			
Maximum percent lot coverage			
Maximum number of stories			
Maximum building height (in feet)			
Square footage of accessory structure			
Distance between principal & accessory structure			
<b>Existing use or uses on the lot:</b>			
<b>Proposed use or uses on the lot:</b>			
<b>Is the property located in a special flood hazard area?</b>			

**NOTE:** Any items that are not applicable to a particular application shall be marked with an "N/A".

**Detail Proposed Information:**

16. Existing and proposed number of units, if applicable: \_\_\_\_\_

17. Are any extensions of municipal facilities or utilities involved with this application? Y  N

If answer is YES, describe: \_\_\_\_\_

18. Are drainage ditches, streams, or other water courses involved with this application? Y  N

If answer is YES, describe: \_\_\_\_\_

19. Has there been any previous applications before the Planning Board/Board of Adjustment involving these premises? Yes  No  Unknown

If so, when: 8/20/2004

Result of decision: approved (attach copy of prior Resolution) ZBA #411-1-25-04

20. Has a Zoning denial been received as part of this application? YES  NO  If yes, please attach.

21. Tax and Assessment payment report indication of all taxes and/or assessment required to be paid attached to this application:  YES  NO

22. Are any easements or special covenants by deed involved with this application?  YES (If yes, attach copy)  NO

**AFFIDAVIT OF APPLICATION**

State of New Jersey :  
County of Monmouth : ss

Alice Connolly being of full age, being duly sworn according to Law, on oath depose and says that all the above statements are true.

Alice Connolly  
(Original Signature of Applicant to be Notarized)

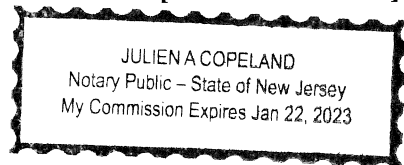
Alice Connolly  
(Print Name of Applicant)

Sworn and subscribed before me this

2nd day of September, 2021

[Signature]  
Signature of Notary Public

[NOTARY SEAL]



**SITE VISIT AUTHORIZATION OF PROPERTY OWNER**

*I hereby authorize any member of the Borough of Bradley Beach Planning Board/Zoning Board of Adjustment, any of said of Board's professionals or reviewing agencies of the Board to enter upon the property which is the subject matter of this application, during daylight hours, for limited purpose of viewing same to report and comment to the Board as to the pending application.*

Date: 9/2/21 \_\_\_\_\_ Alice Connolly  
Signature of Property Owner

**Escrow Agreement**

I/we fully understand an "Escrow Account" will be established to cover the costs of the professional services which will include engineering, legal, planning, architectural, and any other expenses incurred in connection with the review of this application before the Board.

The amount of the Escrow Deposit will be determined by the Borough of Bradley Beach Ordinance Chapter 60. Land Use Procedures Section 60-29. Application fees and escrow requirements. Please see attached for details.

Any request for replenishment of escrow funds shall be due within fifteen [15] days of receipt of the request. If payment is not received within that time, applicant will be considered to be in default, and such default may jeopardize appearance before the Board and/or hold up of any and all pending approvals and building permits. Continued refusal will result in legal action against the property.

Also 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 of completion by the board's professionals who reviewed the application.

By signature below, I/we acknowledge receipt of the Borough of Bradley Beach's Chapter 60. Land Use Procedures Section 60-29. Application fees and escrow requirements and agree to all conditions listed.

Name of Applicant: Alice Connolly  
[please print]

Property Address: 509 Newark Ave Block 18 Lot 6

Applicant's Name: Alice Connolly Alice Connolly  
[Print Name] [Signature of Applicant]

Owner's Name: Alice Connolly Alice Connolly  
[Print Name] [Signature of Owner]

Date: 9/2/21