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

<u>In</u>	formation on Subject Property:
1.	Property address: 408 FIFTH AVENUE, BRADLEY BEACH
	Block(s) 48 Lot(s) 16 Zone: 17
2.	Does the Applicant own adjoining property?   YES
	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):  Applicant seeks relief from Ordinance Section 450-12.10 such biting the
lorge	
pho	ports speck in variances for the west side yard setback he to the expansion of
n-(	contermity, a varience for Balcon, size Continue 450-13c), rear Vall set
Lut	1.9 feet, variance for beinght of accessory building, relief for appropriate deck
4.	Justification/Reasons why each variance should be granted [attach forms as necessary]
	The structures are percheting and non-continuing, Pootprin
	13 not changing. The construction is consistent with size once
	Style in northborhood, Planner will testil, recording
	positive and negative criteria.
5.	If conditional use is required/requested with this application, detail conformance/deviation from the requirements of the zoning ordinance [attach forms as necessary].
	<u> </u>
	ontact Information:
6.	Name of applicant: John Ourando
	Mailing address: 408 FATH AVENUE, BRADLEY BEACH, WI OTTZD
	Phone # Cell #
	E-mail address:

7.	Interest of Applicant if of Owner(s)' Affidavit of A	other than owner (i.e. tenant, co Authorization and Consent mus	intract purchaser)(If appl t be completed & submit	licant is not the owner, tted with this application):					
8.	Name of present owner: TOHN + DOWNA DURANDO								
٥.	Mailing address:	402 FIFTH AVEN	WE BRADLE	EY BEACH NT					
	Phone #		-	Cell#					
	E-mail address:				_				
9.	Contact Person:	<i></i>							
	Mailing address:				_				
	Phone #	Fax #		Cell#	_				
	E-mail address:								
Aı	oplicant's Professionals	'Information:							
10	Name of applicant's Attorney (if applicable) (Companies/Corporations must be represented):    SEAN F BYRNES								
	Mailing Address: 19	15 E. BERGEN	PL, RED D	BANK NI 07	70 j				
		-771) Fax # <u>75</u> 2		Cell#					
	E-mail address:	byrnes@byrnesa	ihen.com		_				
11		gineer (if applicable):			_				
	Mailing Address:				<u>.</u> .				
	Phone #	Fax #		Cell #	_				
	E-mail address:				_				
12	2. Name of applicant's Pla	anner (if applicable):			_				
	Mailing Address:				_				
	Phone #	Fax #		Cell#	_				
	E-mail address:				_				
13	3. Name of applicant's Su	rveyor:			<u>.</u>				
	Mailing Address:		·						
	Phone #	Fax #		Cell#	_				
	E-mail address:								

14. Name of applicant's Architect (if applicable):
Mailing Address: 129 SHREWSBURY AVENUE, RED BANK, NI 0770)
Phone # 732-747-6363 Fax # 732-747-6966 Cell #
E-mail address: Maticonnarch angil com
15. Name of applicant's Other Professional (if applicable):
Mailing Address: 315 STATE HWY 34 COLTS NECK WI (7728)
Phone # 732 845-8103 Fax # 72-845-8104 Cell #
E-mail address: a 1971wa promptanon, net

#### **Detail Property Information:**

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

PRINCIPAL USE:	Required and/or Permitted	<u>Existing</u>	Proposed					
Minimum lot area	5000'	7,500	7,500					
Minimum lot width	501	517	50					
Minimum lot depth	100'	150	150					
Minimum lot frontage								
Minimum front yard setback	25'	25.9/15.9 (DOCK)	259/159					
Minimum rear yard setback	a5',	90	89					
Minimum side yard setback	5/10'	2.6(u)/2.1(e)	7.6/w)/12,1(e)					
Maximum percent building coverage	35%	28.6%	38.9%					
Maximum percent lot coverage	60%	57.6%	57.8%					
Maximum number of stories	2.5	2.5	3.5					
Maximum building height (in feet)	351	32	32					
Square footage of principal structure								
Off-street parking spaces								
Prevailing Setback of adjacent buildings within	the block/within 200 ft.							
ACCESSORY USE/STRUCTURE:	Required and/or Permitted	Existing	<u>Proposed</u>					
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	2	2	2					
Maximum building height (in feet)	28	5.8	282					
Square footage of accessory structure								
Distance between principal & accessory								
structure )								
Existing use or uses on the lot:	<u> </u>							
Proposed use or uses on the lot: KASINATA								
Is the property located in a special flood hazard area?								

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

Detail	Pro	posed	Info	<u>:mation:</u>

16. Existing and proposed number of units, if applicable:	
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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:						
Result of decision: (attach copy of prior Resolution)						
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 : : ss  County of Minimum::						
being of full age, being duly sworn according to Law, on oath depose and says that all the above statements are true.						
(Original Signature of Applicant to be Notarized)						
TOHN DURANT (Print Name of Applicant)						
Sworn and subscribed before me this						
ay of May, 2022 [NOTARY SEAL]						
Signature of Notary Public  Notary Public Notary Public Notary Public of New Jersey						
Commission Expires 10/12/2026						

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  Unknown
If so, when:
Result of decision: (attach copy of prior Resolution)
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:
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 Monmowh  State of New Jersey  being of full age, being duly sworn according to
TOPM DURANDO being of full age, being duly sworn according to Law, on oath depose and says that all the above statements are true.
(Original Signature of Applicant to be Notarized)
& JOHN DURANDO
(Print Name of Applicant)
Sworn and subscribed before me this
ay of February, 20 22 [NOTARY SEAL]
Lude S. nardore
Signature of Notary Public LINDA S. NARDONE.  A Notary Public Of New Jersey  My Commission Expires October 10, 2023

## 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: 2 2022

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:	JOHN AURANDO	
Transfer of tapparent	[please print]	
Property Address:	408 FIFTH AVENUE	Block 48 Lot 16
Applicant's Name: _	TOHN OURANDO [Print Name]	[Signature of Applicant]
Owner's Name:	SAM C [Print Name]	[Signature of Owner]
Date: $\frac{\partial}{\partial x}$	(2027)	·

### BOROUGH OF BRADLEY BEACH Tax Account Detail Inquiry

Owner	BLQ: Name:	DU	48. RANDO, J	16. OHN W & D	onna. M.		Ta Property Lo	x Yea	ar: 2022 to 20 on: 408 FIFTH	022 Ave		
	Year: nal Bi Paym Bal	lle ent	d: s:	Otr 1 3,260.51 3,260.51 0.00	3,26	2 0.50 0.00 0.50	Qtr 3 0.00 0.00 0.00		Qtr 4 0.00 0.00 0.00	Total 6,521.01 3,260.51 3,260.50		**************************************
Date	Qt	r	Туре	Code	Check No.	Mthd	Reference		Batch Id	Principal	Interest	2022 Prin Balance
01/21		1	Descript	ion inal Bille		CK	16748	1	CL-TAX	6,521.01 3,260.51	0.00	6,521.01 3,260.50
1						· · · · · · · · · · · · · · · · · · ·			Total Princi	pal Balance for Ta	x Years in Ra	ange: 3,260.50
Misce Date	llaneo		Type	Code	Range 01/ Check No	01/22 to Mthd	12/31/22: Reference		Batch Id	Principal	Interest	Total
01/09	5/22		Descript Payment		16702	CK	16628		NA-BBC	45.00	0.00	45.00
01/2			408 FIF Payment	TH AVE	6446	VIS CK	CON BUILDERS L 16774	LC 10	NA-BEACH	165.00	0.00	165.00 210.00