

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

Information on Subject Property:

1. Property address: 414 McCabe Ave, Bradley Beach 07720
Block(s) 29 Lot(s) 21 Zone: _____
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):
Existing home on a nonconforming lot will be demolished and rebuilt on existing foundation.
House is currently a duplex, and will be rebuilt as a single family home.

4. Justification/Reasons why each variance should be granted [attach forms as necessary]
We plan to retire and move permanently into this home. The existing home is in poor condition.
The new home will add considerable value to the neighborhood, versus simply renovating
which would result in lower quality home (aesthetically, mechanically etc.). We considered
increasing East side setback but its not possible without interfering with the existing West side
driveway, eliminating current off street parking. The current plan is optimal for the neighborhood/town.
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: Anthony DePaola
Mailing address: 414 McCabe Ave, Bradley Beach 07720
Phone # [REDACTED] Fax # _____ Cell # [REDACTED]
E-mail address: [REDACTED]

- Applicant is the owner

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E-mail address:

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E-mail address: _____

(Companies/Corporations must be represented): n/a

E-mail address: _____

E-mail address: _____

E-mail address: _____

Mailing Address: 1466 Route 88 W, Suite B2, Brick, NJ, 08724

E-mail address: _____

14. Name of applicant's Architect (if applicable): Master of Design/Lori Jeanne Ryder R.A.

Mailing Address: 349 Green Pond Road, Rockaway NJ 07866

Phone # 973-983-9206 Fax # Cell #

E-mail address: ljr@masterofdesignarchitects.com

15. Name of applicant's Other Professional (if applicable): n/a

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)***

<u>PRINCIPAL USE:</u>	<u>Required and/or Permitted</u>	<u>Existing</u>	<u>Proposed</u>
Minimum lot area	5000 SF	2150 SF	2150 SF
Minimum lot width	50'	33.33'	33.33'
Minimum lot depth	100'	64.5'	64.5'
Minimum lot frontage	50'	33.33'	33.33'
Minimum front yard setback	15'	4.2'	4.2'
Minimum rear yard setback	25'	15.4'	15.4'
Minimum side yard setback	5' & 10'	2.4' & 10.6'	2.4' & 10.6'
Maximum percent building coverage	35%	850 SF - 39.5%	842 SF - 39.2%
Maximum percent lot coverage	60%	1225 SF - 58.4%	1290 SF - 60%
Maximum number of stories	2.5	2.5	2.5
Maximum building height (in feet)	35'	34'	34'
Square footage of principal structure	1224 SF	1224 SF	1238 SF
Off-street parking spaces	2	2	2
Prevailing Setback of adjacent buildings within the block/within 200 ft.		4.2'	4.2'
<u>ACCESSORY USE/STRUCTURE:</u>	<u>Required and/or Permitted</u>	<u>Existing</u>	<u>Proposed</u>
Minimum front yard setback	5'	None Exisitning	None Proposed
Minimum rear yard setback	5'	None Exisitning	None Proposed
Minimum side yard setback	5'	None Exisitning	None Proposed
Minimum combined side yard setback	5'	None Exisitning	None Proposed
Maximum percent building coverage	n/a	None Exisitning	None Proposed
Maximum percent lot coverage	n/a	None Exisitning	None Proposed
Maximum number of stories	n/a	None Exisitning	None Proposed
Maximum building height (in feet)	n/a	None Exisitning	None Proposed
Square footage of accessory structure	n/a	None Exisitning	None Proposed
Distance between principal & accessory structure	n/a	None Exisitning	None Proposed
Existing use or uses on the lot: None Exisitning			
Proposed use or uses on the lot: None Proposed			
Is the property located in a special flood hazard area? No			

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: Existing is a Duplex / Prosoed is Single Family

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 All Taxes and Assessment have been paid

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

Anthony DePaola 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)

Anthony DePaola
(Print Name of Applicant)

Sworn and subscribed before me this

1st day of June, 20 22

[NOTARY SEAL]


Signature of Notary Public

REBECCA L. COLEMAN
NOTARY PUBLIC OF NEW JERSEY
Commission # 50133841
My Commission Expires 8/8/2025