



Township of Old Bridge Land Development Application

Office Use Only

Application No. 32-20217 { } Planning Board {X} Zoning Board

Date of Submission _____ Received by: _____

Application Fees _____ Check # _____ Escrow Fees _____ Check # _____

A. Applicant NAME ON CHECK MUST MATCH NAME ON W-9 FORM

Name Lisa Reale

Street Address 185 Escondido Street

City Holmdel State NJ Zip Code 07733

Tele. # 917-968-9143 Cell # _____

Email Address _____

B. Owner

Name Lisa Reale

Street Address 185 Escondido Street

City Holmdel State NJ Zip Code 07733

Tele. # 917-968-9143 Cell # _____

Email Address _____

C. Type of Application

Residential	Non-Residential	General Development
<input type="checkbox"/> minor subdivision	<input type="checkbox"/> minor subdivision	<input type="checkbox"/> phase 1 G.D.P. Plan
<input type="checkbox"/> major subdivision preliminary	<input type="checkbox"/> major subdivision preliminary	<input type="checkbox"/> phase 2 – preliminary
<input type="checkbox"/> major subdivision final	<input type="checkbox"/> major subdivision final	<input type="checkbox"/> amended G. D. P.
<input type="checkbox"/> amended prel/final subdivision	<input type="checkbox"/> amended prel/final subdivision	
<input type="checkbox"/> minor site plan	<input type="checkbox"/> minor site plan	<u>Variances</u>
<input type="checkbox"/> major site plan preliminary	<input type="checkbox"/> major site plan preliminary	<input type="checkbox"/> C:40:55D-70A
<input type="checkbox"/> major site plan final	<input type="checkbox"/> major site plan final	<input type="checkbox"/> C:40:55D-70B
<input type="checkbox"/> amended prel/final site plan	<input type="checkbox"/> amended prel/final site plan	<input type="checkbox"/> C:40:55D-70C
<input type="checkbox"/> waiver of site plan	<input type="checkbox"/> waiver of site plan	<input checked="" type="checkbox"/> C:40:55D-70D

D. Tax Map Sheet 1-16

Block: 13 Lot: 43.12

E. **Previous Appeals or Activity** [] No [X] Yes (if yes, date)_____

Please describe Minor Subdivision with "C" variances pursuant to Application No. #04-19P

F. **Location of Property (street address)**

43 Sunset Avenue, Laurence Harbor, NJ 08879

Type of Road: [] Cul-de-sac (50') [] light arterial (66')
[] minor (50') [] minor arterial (80')
[] collector (60') [] major arterial (120')
Other: 40' Right-of-Way

G. **Description of proposed use:**

Present use: single family residential

Proposed use single family residential

No. of Lots/units/tract area/density: 1 resulting lot of 3,750 square feet

Brief description of application: (d)4 variance for relief from FAR requirements

H. **Zone Districts**

Residential, Commercial, Industrial & Miscellaneous Classifications			
{ XX } R5	{ } R80	{ } CN	{ } SD-1
{ } R6	{ } R120	{ } ER	{ } SD-2
{ } R7	{ } AF	{ } OG-1	{ } SD-3
{ } R9	{ } AR	{ } OG-2	{ } SD-5
{ } R12	{ } EDO-1	{ } OG-3	{ } TCD-A
{ } R15	{ } EDO-3	{ } H	{ } TCD-B
{ } R20	{ } CC	{ } IH-1	{ } TCD-C
{ } R30	{ } CM	{ } IH-2	{ } TCD-D
{ } R40	{ } CR	{ } MU-IH	

I. Bulk Requirements

	Required	Existing	Proposed
Lot Area	5,000 sf	3,750 sf	3,750 sf
Lot Width	50	37.5	37.5
Front Yard	20'	26.2'	26.2'
Rear Yard	25'	25.8'	25.8'
Side Yard (one)	9'	6.2'	6.2'
Side Yard (both)	15'	15.7'	15.7'
Accessory Side yard	10'	N/A	N/A
Accessory Rear yard	10'	N/A	N/A
Non-critical area	N/A	N/A	N/A
Principal building height	28'	28'	28'
Accessory building height		N/A	N/A
Gross floor area	.40	.455	.455
Landscape area ratio	.45	.651	.651
Number of parking spaces	2	2	2

J. Utilities

1. Water

- Will the applicant require new water supply in the street?
- Is Municipal water supply available?
- Is water to be supplied from a well?
- Has an application been made to the Water Authority?
- Has the application been approved?
- If yes, give status Approved { } Denied { }
Pending { } Date: _____
Comments: _____

Yes	No
	X
X	
	X
	X
	X

2. Sewerage

- Will the applicant require new sewerage lines in the street?
- Will this application require expansion of existing lines?
- Will this application require a septic system?
- Has an application been made to the Sewerage Authority?
- Has the application been approved?
- If yes, give status Approved { } Denied { }
Pending { } Date: _____
Comments: _____

Yes	No
X	
X	
	X
	X
	x

3.	Gas & Electric	Existing	Proposed	Above Ground	Below Ground
	Natural Gas	[X]	[]	[]	[X]
	Propane	[]	[]	[]	[]
	Electric	[X]	[]	[]	[X]

Comments: _____

K. Restrictions or Covenants

Are there any existing covenants or deed restrictions on the property?

No { X } Yes { } **Attach copy if yes**

L. Arguments for Variance (to be completed by applicant)

The purpose of the Municipal Land Use Law would be advanced by the proposed deviations
from the existing FAR requirements of the R-5 Zone District and the benefits of the deviations would
substantially outweigh any detriment.

Negative Criteria (to be completed for "D" Variance)

The relief requested may be granted without substantial detriment to the public good in that
the proposed relief will bring the subject property more into conformity with the surrounding area.

The relief requested may be granted without substantially impairing the intent and purpose of
the zone plan or zoning ordinances.

M. List of Maps, reports, and other material accompanying this application:

Description of Item Submitted	Latest revision date on Item
1 Plot plan	6/11/2020
2 Architectural Plan	12/12/2019
3	
4	

N. Witnesses for Applicant

Identifying Letter to precede Name of Witness

{S} Self/Relative {N} Neighbor {O} Other {T} Twp. Employee {E} Expert

Witness		Witness	
1	Richard E. Stockton (E)	4	
2		5	
3		6	

O. Reports received from Outside Agencies

Agency	Date Received	Approved/Denied/Pending
1. N.J.D.E.P.E		
2. Health Department		
3. Board of Education		
4. O.B.M.U.A		
5. O.B. Sewer Authority		
6. Traffic & Safety		
7. Environmental Comm.		
8. M.C. Planning Board		Pending
9. N.J.D.O.T.		
10. Freehold Soil		

P. Disclosure of 10% Ownership Interest of Corporation or Partnership (P.L. 1977, Chapter 336)

(Listed below are names and addresses of all owners of 10% or more of the stock/interest * in the undersigned applicant corporation/partnership:)

Name/Address:	%
Name/Address:	%
Name/Address:	%

*Where corporations/partnerships own 10% or more of the stock/Interest in the undersigned or in another corporation/partnership so reported, this requirement shall be followed until the names and addresses of the non-corporate stockholders/individual partners exceeding 10% ownership criterion has been listed.

Signature of Officer/Partner Date

Name of Applicant Corporation/Partnership

Q. List of Individuals who Prepared Plans

ARCHITECT

Name Paul David Rugarber AIA
Street Address 501 Laurel Avenue, Suite 4
City Point Pleasant State NJ Zip Code 08742
Tele. # 732-703-3799 Fax 732-367-7223 Cell # _____
E-Mail Address Paul@PDRdesigns.com

ENGINEER

Name Richard E. Stockton & Assoc., Inc.
Street Address PO Box 124
City Atlantic Highlands State NJ Zip Code 07716
Tele. # 732-872-2827 Fax 732-872-942 Cell # _____
E-Mail Address _____

SITE PLANNER

Name _____
Street Address _____
City _____ State _____ Zip Code _____
Tele. # _____ Fax _____ Cell# _____
E-Mail Address _____

ATTORNEY

Name Richard J. Pepsny, Esquire
Street Address 766 Shrewsbury Avenue, Suite 302
City Tinton Falls State NJ Zip Code 07724
Tele. # 732-842-8505 Fax 732-842-8525 Cell # 732-778-2816
E-Mail Address pepsnylawfirm@outlook.com