

## APPLICATION TO THE CITY OF SOUTH AMBOY PLANNING BOARD/ZONING BOARD OF ADJUSTMENT

SUBDIVISION PRELIMINARY SITE PLAN INARY MAJOR SUBDIVISION FINAL SITE PLAN MAJOR SUBDIVISION BULK VARIANCE X TONAL USE APPROVAL USE VARIANCE X
AL INSTRUCTIONS: Applicants shall complete each question to the best of their ability as required for each application.
a. Applicant's Name:Jose and Donna DaSilva
Address: 30 St. Peter Drive, South Amboy, New Jeresy 08879
Telephone: 732-316-1307
o. Owner's Name (if different than applicant): Estate of Regina Tietchen
Address: c/o Kimberly Kover, Executrix, Post Office Box 501, Ocean Gate New Jersey
Telephone: 732-690-3188
Attorney: Peter A. Vignuolo, Esq./Clarkin & Vignuolo, P.C.
Address: 86 Washington Avenue, Milltown, New Jersey 08850
Telephone: 732-981-0808 Fax: 732-981-9797
Email address: pvignuolo@verizon.net
Property Street Address: 258 First Street
Block: 52 Lot(s): 5 Tax Sheet(s): 19
General Description of Existing and Proposed Use:  Nonconforming two-family dwelling for which applicant seeks conditional use variance.
Building Zone District: RA
Total Site Area: Acreage: 0.12 acres Square Feet: 5,328 sq. ft.
Existing Building Area In Square Feet: Height In Feet: < 35 ft.
Proposed Building Area In Square Feet: Same Height In Feet:
Description of Proposed Development: Applicant seeks to use property as a two-family dwelling.
List of variances required. See attached.

Case No. 409 20

	None known.		
2.	a. Twenty (20) copies of Application		
		and final site plans/minor subdivisions/preliminary and major	
31	c. All plans shall be prepared in conform standards as shown on checklist form.	nance with the appropriate subdivision, variance and/or site plan	
**	d. Twenty (20) copies of fully executed of	checklist forms.	
3. Ce	rtified list of property owners obtained fro	om Tax Assessor's office.	
. Ce	rtification that taxes, assessments, municip	pal liens, etc. are paid.	
	One (1) copy of the Affidavit of Publication. Notice needs to appear once in the Home News Tribune at least ten (10) days prior to the hearing.  One (1) copy of the Proof of Service including postage receipts and green cards. Notices need to be postmarke at least ten (10) days prior to the hearing.  Does the applicant request the Board to publish notices of decisions: Yes No _X		
. Do			
	owner of the premises in the within application.	cation, I hereby authorize the applicant or agent to submit the abov	
Sig	gnature of Owner		
Ov	vner Name:	Date Constitution	
. Ac	ceptance of reasonable review costs by Bo	nen by Kimberly Kover, Executrix pard's professionals.	
Sig	nature of Applicant		
		3 April 2020	
Ap	plicant Viame. Jose DaSilva	Date	
	plicant's Tax ID Number		
Sworn	to and Subscribed		
of Api	me this 3 day 2020.		
	A. Vignuoló, Esq.		
Votary	ey at Law, State of New Jersey Public of New Jersey	De Desertito Cala	
	cation Page 2	For Board Use Only Case No. 409-20	

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	I. List of any licenses, permits and/or other approvals required by municipal, county, state, or federal law:  None known.
2.	a. Twenty (20) copies of Application
	b. Twenty (20) copies of all preliminary and final site plans/minor subdivisions/preliminary and major subdivision.
	c. All plans shall be prepared in conformance with the appropriate subdivision, variance and/or site plan standards as shown on checklist form.
	d. Twenty (20) copies of fully executed checklist forms.
3.	Certified list of property owners obtained from Tax Assessor's office.
4.	Certification that taxes, assessments, municipal liens, etc. are paid.
5.	One (1) copy of the Affidavit of Publication. Notice needs to appear once in the Home News Tribune at least ten (10) days prior to the hearing.
6.	One (1) copy of the Proof of Service including postage receipts and green cards. Notices need to be postmarked at least ten (10) days prior to the hearing.
7.	Does the applicant request the Board to publish notices of decisions: Yes No $\frac{X}{X}$
8.	As owner of the premises in the within application, I hereby authorize the applicant or agent to submit the above application.
9.	Signature of Owner  Where I and American State of Regina Tietchen by Kimberly Kover, Executrix  Acceptance of reasonable review costs by Board's professionals.
<i>,</i> .	Signature of Applicant
	Applicant Name: Jose DaSilva Date
10.	Applicant's Tax ID Number
	JO ANN MARX MY COMMISSION # GG 284689 EXPIRES: December 17, 2022 Bended Thru Notary Public Underwriters
Not	ary Public of New Jersey
Ap	For Board Use Only  Case No. 409 20