ALL SUBMISSIONS MUST CONTAIN A SIGNED AND COMPLETED CHECKLIST/COVER SHEET OR WILL NOT BE ACCEPTED

Please read all instructions carefully. Failure to follow instructions may result in delays in Application being deemed complete.

BOROUHG OF HARVEY CEDARS LAND USE BOARD
APPLICATION INSTRUCTIONS

Please read - important information

Dear Applicant,

Enclosed is an application and checklist for the Borough of Harvey Cedars Land Use Board. In order to be scheduled for a public hearing your are required to complete all forms and turn in all information requested together with appropriate fees. You will be notified as to whether your application has been determined complete or incomplete by the board attorney. Once you have been notified your Application is complete and assigned a docket number you must serve and publish the required notice. DO NOT PUBLISH OR SERVE NOTICE UNTIL ADVISED BY THE BOARD ATTORNEY.

The completed application, checklist, photos, supporting documentation and fees must be submitted at the same time. Partial or incomplete submissions will not be accepted.

Please note the following requirements:

1. All maps, plats, plans, surveys etc. must be prepared by a professional licensed to practice in the state of New Jersey and be **no more than one year old.** At least one original with a raised seal and original signature must be provided along with the required number of copies. No altered documents will be accepted. Copies must be of a sufficient size to be legible and capable of reproduction. Any alterations and/or changes must be certified by professional who prepared plans with the date of the revision clearly indicated on the map, plan or plat.

2. All applications for variances must be submitted with a Variance Map which shall contain a variance table which clearly identifies the existing conditions, proposed conditions and which conditions require a variance and if pre-existing. **A survey is not sufficient.**

3. It is your responsibility to forward the required copies directly to the Board Engineer, Attorney, Fire Department and Police Department.

4. Please note that if you submit additional documentation after the initial submission you **must** submit the number of copies set forth on the Supplemental Checklist and distribute to the same individuals as the original submission. No documentation and/or exhibits may be submitted less than 10 days prior to the hearing or at the hearing. **Exhibits which are introduced at the hearing may be barred and the application carried to the next available hearing date.** This is required so that the file available for examination by the public is complete at least 10 days prior to the hearing and to ensure the board professionals have

adequate time to review same.

If your application is determined complete you must submit **NO LATER THAN 5 DAYS PRIOR TO THE MEETING along with the CHECK LIST ON THE FINAL SUBMISSION the following**:

1. One copy of Certified List of Property Owners and other parties to be notified. Contact the Tax Office for List. It takes several days for the office to prepare the list so do not wait to the last minute to request same. Not more than 90 days old

2. One copy of letter sent to property owners identified on Certified List.

3. Certified Mail Receipts (Originals from post office). Must be dated at least 10 days prior to the hearing date not counting the date mailed or the hearing date.) This is the receipt of mailing **not** the green card which is returned when the mail is accepted by the addressee. Do not submit the return receipts. You only need to prove mailing, not receipt.

4. Original Proof of publication from official newspaper, published at least 10 days prior to the hearing date. Contact township clerk for name of official newspaper. Please note the newspaper requires the submission and payment in advance of publication date. Make sure you submit your request early enough to be published at least 10 days before the hearing not counting the day of the hearing.

5. Affidavit of Service.

6. Proof of payment of Taxes from Tax Collector's Office. Please contact the Tax Collector's Office. All taxes due prior to the hearing date must be paid.

HARVEY CEDARS BOROUGH LAND USE BOARD
CHECKLIST FOR INITIAL SUBMISSION

PLEASE NOTE: A signed, completed checklist must be received by the Land Use Board Clerk and attorney prior to deeming your application complete.

All applications and all required documents shall be submitted at least thirty (30) days prior to the regularly scheduled meeting of the Land Use Board at which consideration is sought.
NUMBER OF COPIES REQUIRED -All documents must be submitted at the same time.
INCOMPLETE SUBMISSIONS WILL NOT BE ACCEPTED!!!!

DISTRIBUTION

Please note it is the Applicant's responsibility to distribute completed applications

Kevin S. Quinlan, Esq., 207 W Main Street, Tuckerton NJ 08087
_____ 1 Copy of complete Application
_____ 1 Copy of Variance Map, Site Plan or Sub-division Map
_____ 1 Copy of Architectural Plan
_____ 1 Copy of color photos
_____ 1 Copy of Tax Map with property Lot and Block highlighted.
_____ 1 Copy of Affidavit of Ownership, Consent, Authorization and Non-Collusion.
_____ 1 Copy of Proposed Notice to Property Owners and for Publication
_____ 1 Copy of Checklist
Electronic Copies via e-mail

Emergency services: ☐ High Point FD and Harvey Cedars Police Dept.
_____ 1 Copy of Application
_____ 1 Copy of Variance Map, Site Plan or Sub-division Map
_____ 1 Copy of Architectural Plan

Frank Little, P.E., P.P. , Owen Little and Assoc., Inc. 443 Atlantic City Blvd. Beachwood, NJ 08722
_____ 1 Copy of Completed Application
_____ 1 Copy of Variance Map, Site Plan or Sub-division Map
_____ 1 Copy of Architectural Plans
_____ 1 Copy of color photos
_____ 1 Copy of Tax Map with property Lot and Block highlighted
Electronic Copies via e-mail

Board Clerk
_____ 1 Original of each - ☐ Application ☐ Variance Plat, Site Plan or Sub-division Plat, ☐ Architectural Plan(s) ☐ Tax Map ☐ Zoning Denial, ☐ Color Photos and ☐ items marked with **. **(Check all that apply)**
_____ 14 Copies of Application
_____ 14 Copies of Variance Plat, Site Plan or Subdivision
_____ 14 Copies of Architectural Plan(s)
_____ 14 Copies of Tax Map with property Lot and Block highlighted
_____ 14 Copies of Zoning Denial Letter
_____ 14 Color copies of Property Photos
____ 1 W-9 Form
____ 1 copy of Affidavit of Ownership, Consent, Authorization and Non-Collusion.
____ 1 copy of Signed Checklist (must be submitted with initial documentation. Application will not be accepted without signed Checklist.
___ **Electronic copy of all of the above in PDF format.**

_____ Check for Application Fee $_____
_____ Check for Initial Escrow $_____

Signed: _____ **Date:** _____

_____
(Print name under signature)

APPLICATION TO THE HARVEY CEDARS BOROUGH LAND USE BOARD

Do not write below- for official use only	
Date Received:	
Application Fee:	$
Escrow Fee:	$
Collected By:	
Docket #:	

Name: _____

Block: _____ Lot(s): _____

Street Address: _____

CHECK AS MANY AS APPLY:

- ☐ **Bulk Variance**
- ☐ **Use Variance**
- ☐ **Interpretation**
- ☐ **Informal/Conceptual**
- ☐ **Conditional Use**
- ☐ **Other** _____

- ☐ **Minor Subdivision (Exempt)**
- ☐ **Major Subdivision/Preliminary**
- ☐ **Major Subdivision/Final**
- ☐ **Major Site Plan/Preliminary**
- ☐ **Major Site Plan/Final**

ANSWER ALL QUESTIONS. IF NOT APPLICABLE INDICATE WITH 'N/A' or 'None". INCOMPLETE APPLICATIONS OR APPLICATIONS WITH BLANKS WILL NOT BE ACCEPTED OR DEEMED INCOMPLETE

1. Applicant's Name: _____
   Applicant's Address: _____
   Phone: (____) _____ Fax: (____) _____ e-mail: _____

   Applicant is the ☐ Owner ☐ Agent
   Applicant is ☐ Individual(s) ☐ Corporation ☐ Partnership/LLC

If applicant and/or owner is a corporation, LLC or Partnership, set forth the names and addresses of all stockholders or partners having 10% interest or more on a separate paper. Corporations must be represented by a New Jersey Licensed Attorney and provide a Resolution Authorizing the Application.

2. Owner's Name(s): _____
   _____ _____
   Address: _____
   Phone: (____) _____ Fax: (____) _____ e-mail: _____
   All owners of the property must be identified and sign application. Use additional pages if necessary

3. Applicant's Attorney/Firm: _____
   Address: _____
   Phone: (____) _____ Fax: (____) _____ e-mail: _____

4. Applicant's Planner/Surveyor: _____
   Firm Name and Address: _____
   Phone: (____) _____ Fax: (____) _____ e-mail: _____

Applicant's Architect/Engineer:_____
Firm Name and Address: _____
Phone: (____) _____ Fax: (____) _____ e-mail: _____

Attach additional sheet sheets if necessary.

5. Location of Property: Tax Map Block _____ Lot(s) _____
Street Address: _____

Zone: _____ Tract Area: _____ Lot Dimensions: _____

6. Is the property located on a county road? ☐ Yes ☐ No

7. Is the property located within 200 ft. of a Municipal Boundary? ☐ Yes ☐ No

8. Current Use: _____ Number of Dwelling Units: _____
Proposed Use: _____ Number of Proposed Lots: _____

9. When was the property purchased: _____ Was a Certificate of Occupancy issued: ☐ Yes ☐ No
(Provide copy of last CO)

10. Date of last construction, alteration or addition: _____ Were permits issued: ☐ Yes ☐ No
(Provide copies permits)

11. Existing Conditions:

Number of principal structures: _____ Number of accessory structures: _____

	Principal Structure	**Accessory Structure**	**Non-Conforming**
Building Height			☐
Front Yard Setback			☐
Side Yard Setback			☐
Side Yard Setback			☐
Rear Yard Setback			☐

Distance from adjacent structures: _____

Distance between Principal and Accessory structures: _____

Total Lot Coverage (in square feet): _____

Percentage of Building Coverage: _____% Percentage of Impervious Coverage: _____%

***Indicate any pre-existing non-conformities**

12. Proposed Improvements:

Number of principal structures: _____ Number of accessory structures: _____

Proposed Improvements (Continued)

	Principal Structure	Accessory Structure	Variance Required
Building Height			☐
Front Yard Setback			☐
Side Yard Setback			☐
Side Yard Setback			☐
Rear Yard Setback			☐

***Indicate variance needed**

Distance from adjacent structures: _____ Variance Required: ☐ Yes ☐ No

Distance between Principal and Accessory structures: _____Variance Required: ☐ Yes ☐ No

Total Lot Coverage (in square feet): _____ Variance Required: ☐ Yes ☐ No

Percentage of Building Coverage: _____% Variance Required: ☐ Yes ☐ No

Percentage of Impervious Coverage: _____% Variance Required: ☐ Yes ☐ No

13. Existing Restrictions:
(A) Deed Restrictions: _____ (attach copy) ☐ None
(B) Easements: _____ (attach copy) ☐ None
(C) Condominium or Cooperative: _____ (attach copy) ☐ None

14. Proposed Restrictions:
_____ ☐ None
_____

15. Variance(s)/Waiver(s) Sought:
(A) List required variances: _____☐ None
_____
Provide on separate paper the ordinance number(s) for which a variance(s) is/are being requested and the legal theory supporting the relief sought.

(B) List Waiver(s) requested: _____☐ None

If waivers requested provide on a separate paper the basis for the request.

16. Briefly describe any prior or currently pending proceedings before this Land Use Board or any other Federal, State, County or local board or Agency involving this property which is the subject of this application and attach copies of any applications, supporting documentation and decisions of the relevant body including any denials. (Attach additional sheets if necessary).

_____ ☐ None

_____

_____

17. List all material submitted with this application i.e. plans, drawings, photos, calculations, reports etc.

_____

_____

_____

All owners of record must sign Application (use additional pages if necessary).

Dated: _____ _____

_____, Owner

(Print name under signature)

Dated: _____ _____

_____, Owner

(Print name under signature)

Applicant Signature (if different from Owner(s)):

Dated: _____ _____

_____, Applicant

(Print name under signature)

Dated: _____ _____

_____, Applicant

(Print name under signature)

******MUST BE SIGNED BY APPLICANT AND/OR OWNER NOT ATTORNEY******

Harvey Cedars Borough Land Use Board

AFFIDAVIT OF OWNERSHIP, CONSENT, AUTHORIZATION, and NON-COLLUSION

STATE OF NEW JERSEY :
: ss.
COUNTY OF _____ :

I, _____ being duly sworn according to law,
(Print owner(s) name(s))
upon my/our oath depose and say:

1. I/we am/are the only owner(s) of property known as _____,
(Street Address)
_____, Ocean County, New Jersey known as :

Block _____ Lot _____
Block _____ Lot _____
Block _____ Lot _____

As shown on the Official Tax Maps of the Borough of Harvey Cedars.

2. I/we consent to the making of this application and the approval of the plans submitted herewith. I/we further agree to be bound by all representations and commitments made by myself/ourselves or my/our authorized agent. I/we further consent to the inspection of this property in connection with this application as deemed necessary by the members of the Land Use Board and/or other designated officials or representatives.

3. There has been no collusion between me/us and any member of the Borough of Harvey Cedars Land Use Board or any officials of the Borough of Harvey Cedars with respect to said application.

4. I/we hereby authorize _____ (Agent), to make application on my/our
(Print agent name)
behalf. I further agree to be bound by all representations, promises and commitments made by my agent.

Dated: _____

_____
Signature of Owner

_____
Print Name above

_____
Signature of Owner

_____
Print name above

Sworn and Subscribed to before me
this ____ day of _____, 20___.

_____
Notary Public

HARVEY CEDARS BOROUGH LAND USE BOARD
CHECKLIST FOR SUPPLEMENTAL SUBMISSION

PLEASE NOTE: This form must be used with all supplemental submissions. Submissions will not be accepted if not accompanied by this signed form. Supplemental submission will not be accepted less than ten (10) days before the hearing date.

Applicant Name: _____

Block: _____ **Lot(s):** _____
Street Address: _____

The following supplemental documents are being submitted to the Land Use Board Clerk at least ten (10) days before the hearing date and distributed as follows:

NUMBER OF COPIES REQUIRED

____ 13 Copies of _____ (Describe submission)
____ 13 Copies of _____ (Describe submission)
____ 13 Copies of _____ (Describe submission)
____ 1 Digital copy

DISTRIBUTION

Please note it is the Applicant's responsibility to distribute supplemental material to the following individuals and entities:

Kevin S. Quinlan, Esq., 207 W Main Street, Tuckerton NJ 08087
_____ I have mailed copies of the material identified to the Board Attorney.

Frank Little, P.E., P.P. , Owen Little and Assoc., Inc. 443 Atlantic City Blvd. Beachwood, NJ 08722
_____ I have mailed copies of the material identified to the Board Professional.

Board Clerk
_____ 1 Original and 10 Copies of _____ (Describe submission)
_____ 1 Original and 10 Copies of _____ (Describe submission)
_____ 1 Original and 10 Copies of _____ (Describe submission)

Signed: _____ **Date:** _____

_____
(Print name under signature)

HARVEY CEDARS BOROUGH LAND USE BOARD
CHECKLIST ON FINAL SUBMISSION

PLEASE NOTE: A signed, completed FINAL checklist and required documents etc... must be received by the Land Use Board Clerk AND Board Attorney not less than five (5) days before the hearing date or the matter will be carried to the next meeting date..

Applicant Name: _____

Block: _____ **Lot(s):** _____

Street Address: _____

The following documents must be received by the Land Use Board Clerk at least five (5) days prior to the meeting date.

_____ Original Certified List of Property Owners (not more than 90 days old)
_____ Copy of letter sent to Property Owners
_____ Original Proof of Publication from official newspaper.
_____ Affidavit of Service with Original Certified Mail Receipt with post date no less than 10 days prior to the hearing date not including the date of mailing and hearing date attached thereto. (Do not submit the Return Receipt Cards (green cards)).
_____ Original Proof of Payment of Taxes from Tax Collector's Office.

The following must be provided to the Attorney for the Board at least five (5) days before the hearing:

Kevin S. Quinlan, Esq., 207 W Main Street, Tuckerton NJ 08087 ksqesq@comcast.net
_____ Affidavit of Service
_____ Proof of Publication
_____ List of Exhibits
_____ List of all lay witnesses anticipated to be called at hearing.
_____ List of all expert witnesses (For those who have not appeared before this board a copy of their qualifications).

Signed: _____ **Date:** _____

_____
(Print name under signature)

PROOF OF PAYMENT OF TAXES

Harvey Cedars Borough Tax Collector
7606 Long Beach Blvd.
Harvey Cedars, NJ 08008

RE: Block #____, Lot #(s)_____ Street Address:
_____

Assessed Owner:
_____

Taxes Paid to date: _____ Taxes due as follows:
_____

Respectfully Yours,

Tax Collector
Harvey Cedars Borough

Applicant: Submit this form and required fee to the Tax Collector's Office at the Municipal Building.