

Township of Ocean

Monmouth County

399 Monmouth Road
Oakhurst NJ 07755-1589

Marianne Wilensky

**Director of Community
Development**



Department of Community
Development

732-531-5000 X 3350
FAX 732-531-5286

Appeals Application

1. The original and nine (9) copies of the application.
2. Written commentary regarding your request.
3. Fee: \$500.00
4. Escrow \$1,000.00

Separate checks made payable to the Township of Ocean.

All Maps or Plans MUST BE FOLDED

*** Office Use Only ***

Building Department _____

Crime Prevention _____

Board Engineer _____

Environmental Commission _____

Traffic Safety _____

Fire Marshal _____

Township Planner _____

Public Works Department _____

Tax Assessor _____

Code Enforcement _____

Deal Lake Commission _____

Please review and return to my office by:

Marianne Wilensky

Applicant _____

Address _____

Daytime telephone _____ Fax Number _____

Email Address: _____

Owner's name/address if other than applicant:

Attorney Representing Applicant: _____

Phone _____ FAX _____

Attorney email: _____

**IF OTHER THAN OCCUPANT,
PLEASE PRINT NAME OF CONTACT PERSON**

Contact Telephone: _____

ZONING VARIANCE Hardship: Addendum #1 _____

Use: Addendum #1 _____

CONDITONAL USE Addendum #2 _____

SITE PLAN

SUBDIVISION

Preliminary Addendum #3 _____

Final Addendum #3 _____

Minor Addendum #3 _____

Amended Addendum #3 _____

Extension Addendum #3 _____

Minor Addendum #4 _____

Preliminary Addendum #4 _____

Final Addendum #4 _____

Amended Addendum #4 _____

Extension Addendum #4 _____

CERTIFICATION OF USE _____

CONCEPTUAL REVIEW Addendum #4 _____

MINOR SITE PLAN SUBCOMMITTEE REVIEW Addendum #3 _____ Addendum #5 _____

Address of Property _____

Block _____ Lot(s) _____

Is this property: Sewered _____ or Septic _____

Description of request: _____

Applicant's Signature _____ Date _____

OWNERSHIP CERTIFICATION

I (we) do hereby certify that the undersigned is the owner(s) of the property named in the above application and is aware of the application involving this property.

County of Monmouth
State of New Jersey

Notary Seal

Signature(s) of owner(s) of Property _____

Sworn and subscribed before me on this _____ day of _____ , _____

Signature of Notary

Township of Ocean
Planning Board / Board of Adjustment

ADDENDUM #5
Site Plan or Subdivision Approval

APPLICATION BY CORPORATION OR PARTNERSHIP

OWNERSHIP DISCLOSURE

A corporation or partnership applying to a Planning Board or Board of Adjustment or the Governing Body or a Municipality for permission to subdivide a parcel of land into six (6) or more lots or applying for a variance to construct a multiple dwelling of 25 or more family units, or for approval of a site to be used for commercial purposes, shall list the names and addresses of all stockholders or individual partners owning at least 10% of its stock of any class, or at least 10% of the interest in the partnership, as the case may be.

Both Boards respectfully request that all applicants submit a complete list of ownership for purposes of determining conflicts of interest between the applicant and the Board Members or their professionals.

1. _____
2. _____
3. _____
4. _____
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7. _____
8. _____
9. _____
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15. _____
16. _____
17. _____
18. _____
19. _____
20. _____
21. _____
22. _____
23. _____
24. _____

BOARD OF ADJUSTMENT
TOWNSHIP OF OCEAN



PERMISSION FOR INSPECTION OF PREMISIS

I _____ hereby grant permission to Members of the Planning Board or Board of Adjustment, the Board's professionals, or other employees of the Township of Ocean the right to enter in and upon the property located at:

otherwise known as block _____ lot _____ for the purpose of inspection in regard to the pending application which has been filed with the Board for consideration of approval.

Owner's address if other than the above stated:

County of Monmouth
State of New Jersey

Signature(s) of owner(s) of Property

Notary Seal

Sworn and subscribed before me on this _____ day of _____

Signature of Notary

BOARD OF ADJUSTMENT

Township of Ocean

REQUEST FOR CERTIFIED LIST OF PROPERTY OWNERS WITHIN 200' OF:

BLOCK _____ LOT(s) _____

BLOCK _____ LOT(s) _____

NAME and ADDRESS
OF PROPERTY OWNER(s)

PERSON TO RECEIVE LIST IF
OTHER THAN PROPERTY OWNER

OFFICE USE ONLY:

Block _____ **Lots:** _____

_____ **Lots:** _____

Block _____ **Lots:** _____

_____ **Lots:** _____