



Borough of Keyport

OPEN PUBLIC RECORDS ACT REQUEST FORM

Date Received: 2/23/2022

Tracking Number:

OPRA-Req-22-0083

Important Notice

The last page of this form contains important information related to your rights concerning government records. Please read it carefully.

Requestor Information

Name: DAVID YOUNG

Address: _____

City: _____ State: NJ Zip: _____

Telephone: _____ Fax: _____

Email: opra+request-29761-1988938a@requests.opramachine.com

Preferred Delivery: E-Mail

☐ If you are requesting records containing personal information: Under penalty of N.J.S.A. 2C:28-3, I certify that I HAVE NOT been convicted of any indictable offense under the laws of New Jersey, any other state, or the United States.

Signature: _____ Date: _____

Payment Information

Maximum Authorized Cost 0

Letter size pages - \$0.05 per page
Legal size pages - \$0.07 per page
Other materials (CD, DVD, etc) - actual cost of material

Record Request Information:

Location: 156-158 MAIN ST

Records requested:

Permit Application for Fence & Retaining Wall located at 158 Main Street. ✓
Any correspondence regarding the permit application and approval process. ✓
Variance application for Fence & Retaining Wall located at this address. ✓
Any correspondence regarding the variance application and approval process. ✓
Any minutes from public meetings regarding the permit and/or variance application and approval process. None

AGENCY USE ONLY:

Est. Document Cost: _____

Est. Delivery Cost: _____

Est. Extras Cost: _____

Total Est. Cost: _____

Deposit Amount: _____

Estimated Balance: _____

Deposit Date: _____

AGENCY USE ONLY:

Disposition Notes:

Custodian: If any part of request cannot be delivered in seven business days, detail reason here.

In Progress - Open _____

Denied - Closed _____

Filled - Closed _____

Partial - Closed _____

AGENCY USE ONLY:

Tracking Information:

Tracking # _____ Total _____

Rec'd Date _____ Deposit _____

Ready Date _____ Bal. Due _____

Total Pages _____ Bal. Paid _____

Records Provided:

See attached

M. Clark 3/3/22

Custodian Signature:

Date:

Mayor
Robert J. Bargon

Peter R. Vabagl, P.E., CME
Borough Administrator
Supt. Of Engineering



PERMIT NO. _____
RED'D. DATE _____
FEE: _____
CHECK # _____
CASH _____

Anthony J. Nolbert
Zoning Officer

ZONING/FENCE APPLICATION \$35.00

WORK SITE ADDRESS: 1516 Main St Keyport
BLOCK 44 LOT 7 IS THIS A CORNER LOT: YES X NO side & BACK yard

TYPE OF FENCE: 1 Privacy _____ Decorative (50% open) _____ Chain Link _____
HEIGHT OF FENCE: 6' Metal _____ Wood X Vinyl/Plastic _____ Other _____

In residential areas no fence can be over six (6) feet in height in side and rear yards and must be erected on or within property lines. No fence can be over four (4) feet in height in front residential yards (3' if a solid fence) and must be at least 12 inches from any public right of way.

This application must be accompanied by a survey or shop drawing showing location and dimensions of the fence on the lot.

NOTE: IT IS THE HOME OWNERS' RESPONSIBILITY TO ESTABLISH THE LOCATION OF THE PROPERTY LINES AND THE PROPER LOCATION OF THE FENCE.

APPLICANT INFORMATION:

I HERBY CERTIFY THAT I HAVE READ, UNDERSTAND AND AGREE TO CONFORM TO ALL GOVERNING INFORMATION AND REGULATIONS SET FORTH BY THE BOROUGH OF KEYPORT.

Applicants Signature: Anthony J. Biron Anthony BIRON
Address: 1516 Main St City: Keyport Zip: 07735
Phone Number: _____

Fence Installer: Self Phone No: [REDACTED]
License No. _____
Address: _____ City: _____ Zip: _____

Is hereby granted permission to perform the following work to construct or replace a fence and will abide by all provisions of the Borough of Keyport fence ordinance and the following conditions:

1. ALL FENCES SHALL BE INSTALLED WITH GOOD FINISH SIDE TOWARDS NEIGHBOR.
2. NO FENCE SHALL BE INSTALLED CLOSER THAN 6" INCHES FORM YOUR PROPERTY LINE.
3. NO FENCE HIGHER THAN 3' FEET CLOSED OR 4' OPEN STYLE, SHALL BE INSTALLED IN THE FRONT YARD.
4. ALL FENCES SHALL BE INSTALLED FOR PROTECTION OF A POOL, SHALL BE A MINIMUM OF A 4' FOOT SOLID TYPE FENCE WITH SELF-CLOSING GATES AND SELF-LOCKING LATCHES.
5. ALL PERMITS MUST BE FILED ALONG WITH A COPY OF THE PROPERTY SURVEY AND FEE OF \$35.00 MADE PAYABLE TO THE BOROUGH OF KEYPORT BEFORE THE COMMENCEMENT OF ANY WORK.

Review Sent To: _____ Approved: _____ NOT Approved: _____
Zoning Approval: _____ Date Issued: _____
Comments: _____

LOT 8

LOT 4

LOT 4.01

N/F ANNIE L. CONOVER'S LOT

LOT 5

LOT 7

N 08°00'00" W 75.00'

FENCE
0.97

N 82°00'00" E

157.00' IRON PIPE FOUND

FENCE ALONG LINE

CHAIN LINE FENCE
ALONG LINE

D.H. WIRES
D.H. WIRES

ASPHALT DRIVE

MASONRY
FRAMING

21.90'

BLOCK 44

LOT 6

11,775.00 SQ. FT. 0.9'

STOCKPILING FENCE

STOCKPILING FENCE

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STOCKPILING FENCE

MAPLE PLACE

75' R.O.W.

44.7' PAVIMENT

FORMERLY MO + STREET

BLUESTONE CURB

DEE & SURVEY

WIRE

CONC. WALL CURB APRON

BOROUGH OF KEYPORT

ZONING PERMIT APPLICATION

Application No. _____

Zoning Permit No: 2104

The undersigned hereby applies for Zoning Approval to be issued on the basis of the representations contained in this application.

Date: 7.24.00

LOCATION OF PROPERTY: 156 main ST ZONE: _____ BLK: 44 LOT: 6

NAME OF OWNER: Anthony Triano

ADDRESS: 156 main ST PHONE: _____

NAME OF APPLICANT: _____

ADDRESS: _____ PHONE: _____

CONTRACTOR: SELF

ADDRESS: _____ PHONE: _____

THE ABOVE NAMED APPLICANT HEREBY APPLIES FOR A ZONING PERMIT TO: Retaining wall
for Drive way & FENCE, SIDEWALKS, DRIVEWAY

SIZE OF PROPERTY: LOT AREA: _____ SQ.FT./FRONTAGE: _____ FT./DEPTH: _____ FT.

PRINCIPAL BUILDING: TYPE: _____ GROSS FLOOR AREA: _____ SQ.FT.

LOT COVERAGE: _____ PERCENT/BUILDING HEIGHT: _____ FT.

ACCESSORY BUILDING: TOTAL AREA: _____ MIN. REAR YARD: _____ MIN. SIDE YARD: _____

TOTAL NUMBER OF PARKING SPACES EXISTING: _____ PROPOSED: _____ (2 SPACES OF 180 SQ. FT EACH ARE REQUIRED PER DWELLING UNIT.)

IS NEW CONSTRUCTION PROPOSED, YES OR NO? _____ IF YES, PROVIDE DETAILS: _____

ARE MODIFICATIONS TO THE SITE OR EXISTING BUILDINGS PROPOSED, YES OR NO? _____ IF YES, PROVIDE DETAILS: _____

PROPERTY LINE SETBACKS: FRONT _____ FT./RIGHT SIDE _____ FT./LEFT SIDE _____ FT./REAR _____ FT.

SIGNS: TYPE _____ AREA PERMITTED _____ AREA REQUESTED _____

SUBMITTED HERewith IS A DIMENSIONED PLAN (CERTIFIED SURVEY) OF THE LOT SHOWING PROPOSED WORK AND/OR EXISTING STRUCTURE(S).

ESTIMATED COST OF WORK: \$ _____

ZONING PERMIT FEE: \$ 10.00 pd cash

APPROVED: X DENIED: _____ SEE ATTACHED

Fee's:

RETAINING WALL & FENCE SHALL BE 6" & 6"
Property Line
Copy of Survey Required.

SIGNATURE OF APPLICANT

ZONING OFFICER

BOROUGH OF KEYPORT

OFFICE OF THE ZONING OFFICER
24 MAIN STREET
KEYPORT, NEW JERSEY 07735
732-739-3303

DATE: July 20, 2000

44/6

TO: Anthony Triano/ Barry Bloomberg
156 Main Street
Keyport, N.J. 07735

It has come to our attention, that you are in violation of the Municipal Zoning Ordinance of the Borough of Keyport, for failing to obtain zoning permit for the following:

☒ The installation of a fence./retaining wall

☐ The hanging of a banner, in a commercial zone.

☐ The erection of any sign.

☐ The installation of a pool, spa or hot tub.

☐ The alteration, or construction of any deck.

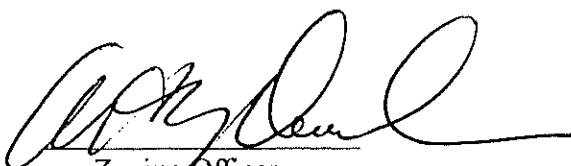
☐ The construction or placement of any accessory structure.

☐ The _____

Continuance of this violation, will be subject to a **\$500.00 A DAY FINE**, and a summons to Municipal Court, if not abated by; 7/28/00.

Failing to obtain zoning approval for any of the above, is subject to a **\$500.00 a day fine**, along with any other fines, penalties or fee's, which are applicable.

Please contact this office immediately, to rectify this situation.


Zoning Officer

*Amended for
Zoning Permit*