



Payment of zoning application fees are required with submission of application. Type of application:

132981

Property serviced by:

- () Sewer/Water
(X) Septic/Well

- () Deck () Porch () Addition
() Shed () Patio () Detached Garage
() Fence () Pool () Gazebo/Cabana/Pool House
() Sign () Generator () Solar
() New Commercial Bldg () Commercial Alteration () Change in business use/tenant
() New Residential Dwelling Type: _____ () New Multi-Family Dwelling
() Certificate of Non-Conformity Other: Finish Basement

TOWNSHIP OF MANALAPAN - REQUEST FOR ZONING PERMIT

ADDRESS OF CONSTRUCTION: 20 Fountayne Ln, Manalapan BLOCK/LOT: 8001/1
PROPERTY OWNER: KEMAR R. PHILLIPS TEL#: (201) 491-7133
PROPERTY OWNER'S ADDRESS: 20 Fountayne Ln, Manalapan NJ 07726
E-MAIL ADDRESS: KRphillips84@gmail.com
APPLICANT: KEMAR R. PHILLIPS TEL#: (201) 491-7133
APPLICANT'S ADDRESS: 20 Fountayne Ln, Manalapan NJ 07726
PROPOSED WORK: Finish Basement DIMENSIONS: 16' x 6' x 27'

SET BACKS: Front _____ Rear _____ Sides _____ Street Side _____ Distance between Structures _____ HEIGHT: _____

SIGNAGE: Square Foot: _____ ZONE: _____ BLDG COVERAGE: _____ NO. OF STORIES: _____

APPROVALS: Zoning Board _____ Planning Board _____ Resolution #: _____

I am familiar with the Codes and Ordinances of Manalapan Township. The proposed project will not constitute nor create a non-conforming use or structure. I will not add nor delete from the requested project specifications without approval. I accept responsibility for any and all violations created by the requested project and understand such violations must be removed and/or abated as directed by the Zoning Officer.

Property Owner's Signature

Print Name

Date

Applicant's Signature

Print Name

Date

OFFICE USE ONLY:

APPROVED: ☒ DENIED: ☐

PERMIT # 221-1032

REMARKS: Swimming must remain single family use only
No spa or bathroom permitted

Zoning Officer

Date

CERTIFICATE OF ZONING COMPLIANCE

To the best of my knowledge the finished project conforms to the Code and Ordinances of the Township of Manalapan.

APPROVED: _____ DENIED: _____ REMARKS: _____

Zoning Officer

Date

INTEROFFICE MEMORANDUM



TO: HEALTH DEPARTMENT
FROM: DEPARTMENT OF ZONING & CODE ENFORCEMENT
SUBJECT: PLAN REVIEW
DATE: SEPTEMBER 22, 2021
CC: FILE

Please find attached an application for a Zoning Permit.

Kindly review for Approval/Disapproval and return to our office.



BLOCK: 8001

LOT: 1

NAME: Phillips

ADDRESS 20 Fountayne Lane

APPLICATION TYPE: Basement

APPROVED

DISAPPROVED

NO PLUMBING 9/29/21 JR

COMMENTS:

TOWNSHIP OF MANALAPAN
Department of Code Enforcement & Zoning

120 Route 522 & Taylors Mills Road, Manalapan, NJ 07726

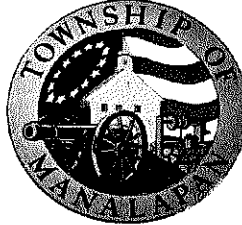
Fax (732) 446-0134

Code Enforcement/Zoning Officer

NANCY DEFALCO

732-446-8322

ndefalco@mtnj.org



Asst. Code Enforcement/Zoning Officer

SUZANNE M. KROHN

732-446-8301

skrohn@mtnj.org

To: The Township of Manalapan

From: Henry R. Phillips
(Name)

Re: 20 Fountayne Ln., Manalapan
(Property address)

By my signature, I attest that I am the owner of the above referenced property. I assure the Township that my residence will remain a single family home and the modification I am proposing will not create nor will it be utilized as a separate dwelling unit.

The above referenced property will **not** be in violation any development regulation standards and if determined otherwise; I will discontinue the "use" until the necessary steps are taken to bring the residence/property into compliance.

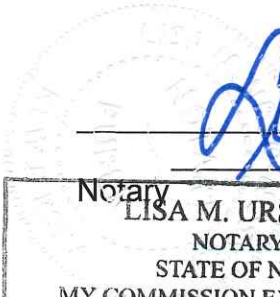
Further, I have had a chance to discuss these regulations as set in Ordinance with the Township's Code Enforcement & Zoning Department and I acknowledge that I understand the same.

[Signature]
Signature

10/13/21
Date

20 Fountayne Ln., Manalapan NJ 07726
Address

20 Fountayne Lane
Kemar Phillips


Lisa M. Urso-Nosseir

Date

10/13/21

Notary

LISA M. URSO-NOSSEIR

NOTARY PUBLIC

STATE OF NEW JERSEY

MY COMMISSION EXPIRES AUG. 10, 2026

Existing construction

