

Town Clerk

From: Francesca Bonaccorsi Haight <opra+request-26432-b4aeeb09@requests.opramachine.com>
Sent: Thursday, October 14, 2021 9:27 AM
To: Town Clerk
Subject: OPRA request - 25 Green St-OPRA request

Dear Hope Township,

This is a request for public records made under OPRA and the common law right of access. I am not required to fill out an official form. Please acknowledge receipt of this message.

Records requested: septic tank history, oil tank history and any open/closed permits on the property located at 25 Green St, Blairstown (Hope Twp.).

Thank you,

Francesca Haight
RE/MAX Neighborhood Properties

*Zoning Response
10/20/21 (FB)*

Block: 4000 Lot: 107

*See attached. These are copies, don't
need them back...*

Please use deliver records electronically via email to the below UNIQUE address for all replies to this request:
opra+request-26432-b4aeeb09@requests.opramachine.com

Is townclerk@hopetwp-nj.us the wrong address for OPRA requests to Hope Township? If so, please contact us using this form:

https://opramachine.com/change_request/new?body=hope_township

Disclaimer: This message and any reply that you make will be published on the internet. Our privacy and copyright policies:
<https://opramachine.com/help/officers>

View this OPRA request & responses online:
https://opramachine.com/request/25_green_st_opra_request

Please note that in some cases publication of requests and responses will be delayed.

If you find this service useful as an OPRA custodian, please ask your web manager to link to us from your organisation's website.

*rec'd 10/14/21
cc: zoning
const*

TOWNSHIP OF HOPE, NEW JERSEY
Application for Zoning Permit

Office Use
Only

Date
Rec'd

Time:

By:

INSTRUCTIONS

1. Please use ball point pen or type. Do not use pencil.
2. Please answer all questions. If the answer is "none", state "none".
3. Attach a plot plan or survey map of the property, drawn to scale, showing what exists now on the property and what changes you propose to make. Include existing and proposed structures, paved areas, signs, etc., and show their dimensions and distances from both the property lines and other structures.
4. If the applicant is other than the owner of the property, an affidavit of ownership from the owner may be required.

Name of Applicant

Joseph R ENSLIN

Name of Owner (if different from applicant)

Address of Applicant

9 S. Glen Ave Mt Arlington

Address of Owner (if different)

Applicant's phone:

298-9639

Owner's phone:

What is the present use of the principal building?

NA

What is the proposed use of the principal building?

Self occupy

What is the present use of any accessory building?

NA

What is the proposed use of any accessory building?

NA

What are the proposed uses of any new structures or additions for which a zoning permit is requested?

NEW SING FAM RES AS PG SITE PLAN SUBMITTED
BY McDONALD 4-29-89

State whether the property has been the subject of any prior application(s) to the Zoning Board of Adjustment or the Planning Board. If none, state none. If so, state the nature of the application, the date, and the action(s) of the Board(s).

~~YES~~ NO

Address of premises

GLEN ST

Block # 4000 Lot# 107 Zone

I hereby make application for a zoning permit for the changes described above and on the attached plot plan or survey map. I understand that before starting construction a building permit may be required. Answers to the above questions and representations made on attachments to this application are true and complete to the best of my knowledge.

Date June 7 89

Signature of Applicant (individual)

Attest
Secretary

Name of Corporation or Association

By

DO NOT WRITE IN
THIS SPACE

(X) Permit issued () Denial Issued

6-16-89-022

Township of Hope
County of Warren-State of New Jersey
PO Box 284
Hope, NJ 07844

Eric Fortier
(cell) 201-874-1258
(builder)

ZONING COPY

Zoning Application Fee (See reverse side)

908-459-5011

Date: 2-20-06
Block: 4000 Site Address: 25 Green St
Lot: 107 Zone District: _____ Use: _____
Applicant: Rose M. D'Amato Telephone: 908-459-5169

Lot Width: 300.00' Lot Depth: 434.40' Lot Area: 2.99 acres
What is present use of the Principal Building: Residence
Please indicate Proposed New Use/Structure: garage / deck / screened porch
Distance from Property Lines:
Front: 100.0' Left: 150.3'
Right: 68.7' Rear: 300.
Height: 1 story

Distance to Other Buildings _____

Has a Variance been granted on this Lot? NO If so, when? _____

SITE PLAN: Show all existing and proposed structures, their dimensions and distance to any other building, well, septic, and all front, side and rear boundaries. Show presence or absence of any wetland on subject property.

I hereby certify that the above information is true to the best of my knowledge.

Applicant Signature: Rose M. D'Amato Date: 2-20-06

-----Do not write in this space-----

(☒) Permit Issued # ZN 02-06 () Denial Issued # _____

Comment: No Further Front Yard Encroachment

Fee Paid: \$25.00 Check # 134 Cash _____

Zoning Officer: [Signature] Date: 2/22/06

* A zoning Permit does not release the applicant of any responsibility to obtain any other permits or necessary approvals.

Notes: _____

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NOTHING FOUND 10/15/21
(Jm)

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cust ✓