



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

Property serviced by:

- ☒ Sewer/Water
☐ 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: _____

127702

TOWNSHIP OF MANALAPAN - REQUEST FOR ZONING PERMIT

ADDRESS OF CONSTRUCTION: S Joyce court BLOCK/LOT: 342/29

PROPERTY OWNER: Michael Rose TEL#: 718-839-5710

PROPERTY OWNER'S ADDRESS: S Joyce Court Manalapan NJ 07726

E-MAIL ADDRESS: mike.rose0322@gmail.com

APPLICANT: Pizzo Contracting TEL#: 732-505-1779 x561

APPLICANT'S ADDRESS: 1519 Route 9 Toms River NJ 08755

PROPOSED WORK: New Deck DIMENSIONS: 48' x 18'

SET BACKS: Front 100 Rear 49 Sides 21 Street Side 63 Distance between Structures _____ HEIGHT: 60

SIGNAGE: Square Foot: _____ ZONE: R40/20 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.

Michael Rose Michael Rose 8/29/2020
Property Owner's Signature Print Name Date

Pizzo Contracting Pizzo Contracting _____
Applicant's Signature Print Name Date

OFFICE USE ONLY:

APPROVED: ☒ DENIED: _____ PERMIT # 220-0698

REMARKS: _____

Nancy DeFaleo 9/14/2020
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

