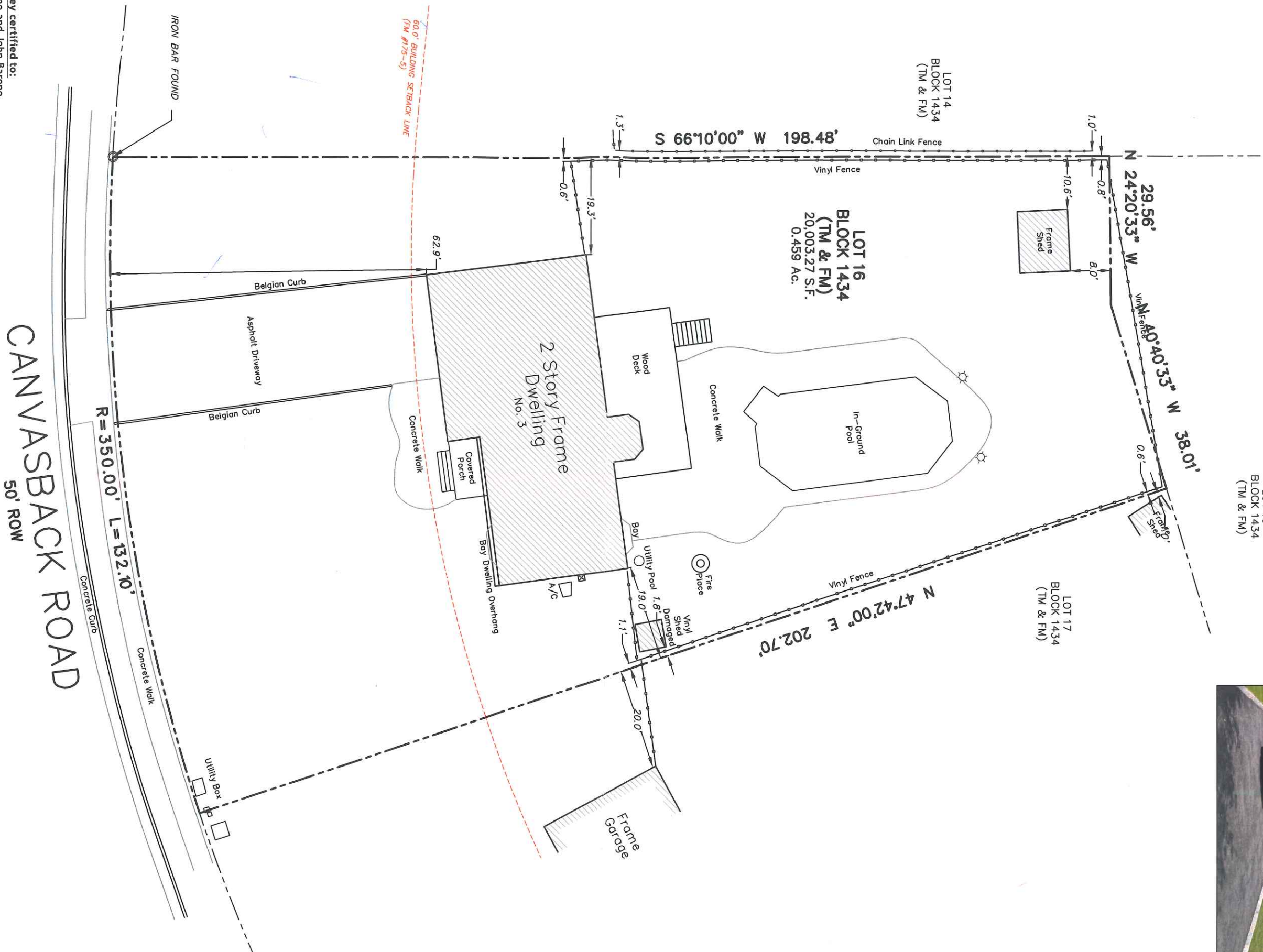


LOT 15
BLOCK 1434
(TM & FM)

LOT 17
BLOCK 1434
(TM & FM)

LOT 14
BLOCK 1434
(TM & FM)

LOT 16
BLOCK 1434
(TM & FM)
20,003.27 S.F.
0.459 Ac.

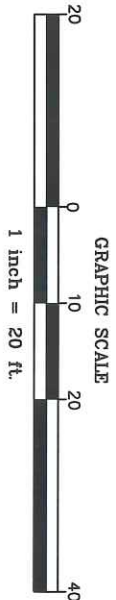


This survey certified to:
Michelle Barone and John Barone

KNOWN AND DESIGNATED as Lot 16 Block 1434 as shown on a certain map entitled, "Map of Oak Leaf North, Section 2, situated in the Township of Manalapan, Monmouth County, New Jersey," filed in the Monmouth County Clerk's Office on September 21, 1981 as Map No. 175-5.

This survey references:
Deed Book 5666 Page 497
Monmouth County Filed Map No. 175-5

Notes:
Field Survey Performed on 06/13/2022
Survey performed without the benefit of a complete title search and subject to municipal restrictions, easements of record and other facts that a title search may disclose.
Subject to documents of record



SURVEY OF PROPERTY

PROJECT NUMBER
222134

akeland

Certificate of Authorization
#24GA28090000

Marc J. Cifone
PROFESSIONAL LAND SURVEYOR

Jeffrey
PROFESSIONAL

I declare that this plan is based on actual field survey performed by Akeland Surveying, Inc., under my direct supervision and that I am a duly licensed Professional Land Surveyor in the State of New Jersey. I have read the conditions of the contract and agree to the terms and conditions of the contract. This declaration is given solely to the above named parties to this transaction only and is not transferable to any other parties.



TOWNSHIP OF MANALAPAN

DEPARTMENT OF ZONING/CODE ENFORCEMENT
120 ROUTE 522
MANALAPAN, NJ 07726
(732)446-8301

Nancy DeFalco

Zoning/Code Enforcement Officer
ndefalco@mtnj.org



OFFICE USE ONLY:

Certificate #:

Inspection Date: _____

Issued Date: _____

Survey Date: _____

Reinspection Date: _____

REQUEST FOR ZONING C.C.O. (Non UCC)Date: 1434 Block: 16 Lot: _____PROPERTY LOCATION: 3 CANVASBACK RDOWNER: JOHN & MICHELLE BARONEOWNER'S PRESENT ADDRESS: 3 CANVASBACK RDOWNER(S) E-MAIL ADDRESS: NINEPRESS @ AOL.COMPRIMARY NUMBER: 908-907-4750 ALT. NUMBER: 732-786-1086NAME & EMAIL OF ATTORNEY: PETER LOFFREDO PETERLO PAULAWOFFICE.COM PHONE NO: 732-341-4141BUYER(S) NAME FOR CERTIFICATE: Farhod RasulovEMAIL ADDRESS FOR BUYER(S): farik.rasulov221@gmail.comPHONE NUMBER OF BUYER(S): 929-3264191PRESENT ADDRESS: 2249 Ocean Ave Apt 1F Bklyn, NY 11229NAME, EMAIL & NUMBER OF SELLER'S AGENT: MATT TRONCONE MAXREALSTATEBOT@gmail.comNAME, EMAIL & NUMBER OF BUYER'S AGENT: AARON S LILLER ZAPICCHI+LILLER LP.COMAPPROX. CLOSING DATE: JULY 15TH 2022

Fees are due at the time of application. Acceptable forms payments are cash, check, money order or certified check. Please make checks payable to "Manalapan Township".

ALL FEES ARE NON-REFUNDABLE.

ZONING C.C.O. FEE: \$100.00

I hereby give permission to authorize personnel from the Township of Manalapan to inspect the above-referenced property at any time.

John Barone
APPLICANT'S SIGNATURE

JOHN BARONE
PRINT NAME

6/22/22
DATE



HOME IMPROVEMENT QUESTIONNAIRE

This form must be completed by the homeowner. No letter of authorization will be accepted in lieu.

PROPERTY LOCATION: 3 CANVAS BACK RD

BLOCK: 1434 LOT: 16 ZONING DISTRICT: MANALAPAN

Whether **YOU** made improvements to the property or whether they were in place when you purchased your home, please answer yes or no, if your property has **ANY** of the improvements listed below.

ZONING APPROVAL and or COMMENTS
(Office Use Only)

ADDITION(S)	YES	NO	
CABANA / POOL HOUSE	YES ☒	NO ☒	<u>2001-0955</u>
COVERED PATIO/DECK	YES ☒	NO ☒	<u>97-1773</u>
DECK	YES ☒	NO ☒	
DETACHED GARAGE	YES ☒	NO ☒	
DRIVEWAY- NEW or EXTENSION	YES ☒	NO ☒	
ENCLOSED PORCH	YES ☒	NO ☒	<u>98-2250</u>
FENCE	YES ☒	NO ☒	
FINISHED BSMT (OVEN/STOVE)	YES ☒	NO ☒	
GARAGE CONVERSION	YES ☒	NO ☒	
GAZEBO / PAVILION	YES ☒	NO ☒	
HOT TUB/SPA	YES ☒	NO ☒	
PATIO / PAVERS / WALKWAY	YES ☒	NO ☒	
SHED	YES ☒	NO ☒	
SOLAR PANELS (GROUND MOUNT)	YES ☒	NO ☒	
SPORTS COURT	YES ☒	NO ☒	
STANCHIONS or PORTICO	YES ☒	NO ☒	
SWIMMING POOL	YES ☒	NO ☒	<u>2000-1421</u>
OTHER: _____			

Variances granted in relation to this property. (circle one)

YES

NO

If yes, what for; year; app. #: _____

COMMENTS: (Office Use Only) _____

I DO HEREBY CERTIFY THAT TO THE BEST OF MY KNOWLEDGE THAT THE FOREGOING STATEMENTS MADE BY ME ARE TRUE.

John Barone
HOMEOWNER'S SIGNATURE (SELLER ONLY)

JOHN BARONE
PRINT NAME

6/22/22
DATE

REPRESENTATIVE OF THE ZONING DEPARTMENT

DATE