

BOROUGH OF RUMSON

80 East River Road
Rumson, NJ 07760
732-842-3022

ZONING PERMIT

Date: 2/11/19

Check # _____

TYPE OF APPLICATION

- | | | |
|--|--|-------------------------------------|
| ☒ New dwelling | ☐ New commercial | ☐ Demolition |
| ☐ Residential addition | ☐ Commercial addition | ☐ Deck |
| ☐ Accessory building | ☐ Commercial interior | ☐ Porch |
| ☐ Interior remodeling | ☐ Sign | ☐ Garage |
| ☐ Fence* | ☐ Driveway/Walkway/Patio | ☐ Shed |
| ☐ Air | ☐ Commencement or change of use of a property/structure | ☐ Pool** |
| ☐ Conditioner*** | | ☐ Other |
| ☐ Generator*** | | |

With this application you are required to submit one (1) copy of a current survey/plot plan/site plan and one (1) set of architectural plans. Surveys must show the existing conditions and exact location of physical features including metes and bounds, drainage, waterways, specific utility locations and easements, all drawn to scale. All surveys must be prepared by a land surveyor (signed/sealed). Architectural plans must show Zoning data existing and proposed setbacks (Schedule 5-1), Building Height (Schedule 5-2), Lot Coverage and Building Coverage (Schedule 5-4) and Floor Area (Schedule 5-3).
Permit review fee: \$ 25.00. Additions and New Construction \$50.00. Checks shall be made payable to: Borough of Rumson.

If any of the requested information is submitted incomplete, the application shall be returned unprocessed.

* Indicate location, height, and type of fence on survey/plot plan.

** Pools require a fence. Please indicate type, height, and area of fence and location of filter/heater.

*** Air Conditioner Units: Please indicate proposed location & provide specifications which show the height.

Generators: Please indicate proposed location & provide specifications which show that the unit has a Critical Muffler & Sound Attenuation Enclosure.

(Please Print Clearly)

1. Location of property for which Zoning Permit is desired:

Street Address: 71 BUENA VISTA AVE. Block: 115 Lot: 30 Zone: R-1

2. Applicants Name: ALEC SHISSIAS Tel. No. [REDACTED] Fax No. _____

Applicants

Address: 27 1ST ST., RUMSON, NJ 07760

3. Property Owners Name: MONA ROUMEL Tel. No. [REDACTED] Fax No. _____

Property Owners

Address: 1260 OCEAN AVE., SEA BRIGHT NJ 07760 (UNIT B)

4. Description of Work

DEMOLISH EXISTING SINGLE FAMILY HOME'S WOOD FRAMED STRUCTURE DOWN TO THE FOUNDATION WALL & PARTIALLY DEMOLISH EXISTING FOUNDATION IN ORDER TO CONSTRUCT A NEW 2 1/2 STORY SINGLE FAMILY RESIDENCE CONTAINING APPROXIMATELY 4,675 SQUARE FEET OF INTERIOR HABITABLE SPACE. THE PROPOSED RESIDENCE WILL LARGELY MAINTAIN THE EXISTING HOME'S FOOTPRINT, BUT EXPAND IN THE FRONT & REAR. TO OUR KNOWLEDGE, NO VARIANCES ARE REQUIRED FOR THE PROPOSED RESIDENCE.

5. Has the above premises been the subject of any prior application to the Planning Board/ Zoning Board of Adjustment? Yes ___ No ☒ If yes, state date: _____

Board: _____ Resolution # (if any): _____ (Submit a copy of the Resolution)

6. Approximate year the dwelling was constructed 1952 (LISTING)

7. Is this property listed on the Rumson Historic Preservation Website? Yes ___ No ☒.

Applicant certifies that all statements and information made and provided as part of this application are true to the best of his/her knowledge, information and belief. Applicant further states that all pertinent municipal ordinances, and all conditions, regulations and requirements of site plan approval, variances and other permits granted with respect to said property, shall be complied with. All Zoning Permits will be granted or denied within ten (10) business days from the date of complete application.

Signature of Applicant

Date

Print Applicant's Name

Signature of Owner (if different than applicant)

Date

Print Owner's Name (if different than applicant)

FOR OFFICE USE

Fee date: _____ Check#: _____ Cash: _____

Received by: _____ Receipt#: _____

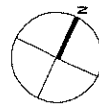
Approved ☒ Denied _____

COMMENTS:

Appeals of the Zoning Officer's determination must be filed within 20 days of the date of issuance to the Planning/Zoning Board as provided by the New Jersey Municipal Land Use Law. This limitation is not imposed if the applicant is seeking a variance, site plan, or subdivisions. The Board reserves the right to deem additional information and/or variances required. Approved zoning permits are valid for one (1) year, and may be extended by action of the Zoning Board.

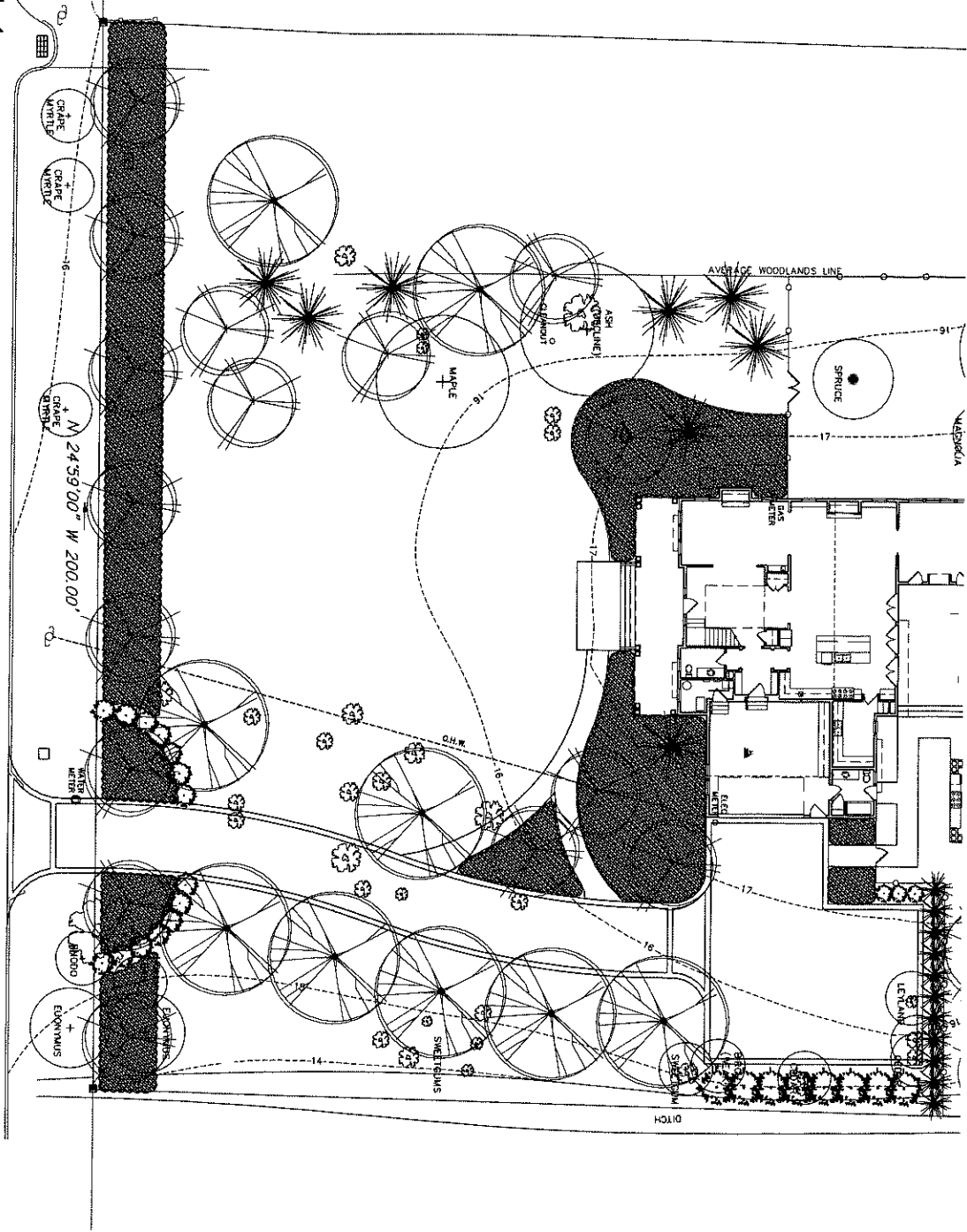
Frederick J. André, Zoning Officer

Date



71 Buena Vista
LANDSCAPE DESIGN
71 Buena Vista Ave., Rumson, NJ 07760
Block 115 / Lot 30

1 FRONT YARD - SCHEMATIC PLANTING PLAN
SK.1 1" = 20'

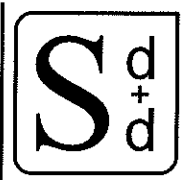


SK.1

FRONTYARD

Issued For:
SPRINKLER
Date: 09 / 12 / 2019
Proj. No: 201915
Drawn By: AFS
Drawing Title: FRONTYARD

NOT FOR CONSTRUCTION UNLESS
SIGNED & SEALED BY ARCHITECT &
APPROVED BY ALL AGENCIES
HAVING JURISDICTION.
USE OF THIS DESIGN OR
DISSEMINATION IS PROHIBITED
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BOROUGH OF RUMSON

80 EAST RIVER ROAD

Phone
732-842-3022
Fax
732-842-0961

TREE REMOVAL PERMIT

DATE OF APPLICATION 3-18-19

PROPERTY LOCATION 71 BUENA VISTA AVE

Block 115 Lot 30

HOMEOWNER Mona Lisa Roome

CONTRACTOR All in ONE

ADDRESS 71 Buena Vista

ADDRESS 224 Wilse Av Portmouth NJ 07758

PHONE # _____

PHONE # _____

Attach a TREE REMOVAL PLAN. For removal of five (5) or less trees at a single family home, the plan may be a sketch, a tax map reproduction, or a copy of a survey with field measurements and dimensions provided by the homeowner or the homeowner's agent. For all other removals, the Tree Removal Plan must be provided by a qualified Professional, acceptable to the Tree Conservation Officer. **MARK TREES TO BE REMOVED WITH A PAINTED YELLOW DOT**

REASON THE TREES MUST BE REMOVED:

New construction, new driveway, trees leaning
towards house
- 10 Gum Trees -

EVALUATION BY TREE EXPERT:

NAME OF EXPERT Richard Dodd PHONE# 732-673-4101

SIGNATURE OF EXPERT [Signature]

PROPERTY OWNER'S CERTIFICATION:

I hereby certify that I am familiar with the Ordinance and Regulations governing this work and hereby agree to comply fully with same. Additionally, I grant permission to the Borough and its employees and agents to enter and inspect at the above listed property. Cost of the Borough's Independent Expert evaluation shall be borne by the applicant.

[Signature] 3/18/19
Property owner signature Date

TREE PERMIT APPLICATION FEE (OFFICE USE)

- () \$10.00 removal of five (5) or less trees on a lot containing an existing single family home
() \$50.00 removal of six (6) to ten (10) trees
() \$100.00 removal of eleven (11) to twenty (20) trees
() \$150.00 removal of over twenty (20) trees.
() \$150.00 For other Applications proposing the removal of five (5) or less trees.
(x) \$150.00 plus \$25.00 per tree removed for all other

5 TREES \$150.00
5 @ \$25.00 \$125.00
TOTAL \$275.00

TREE CONSERVATION OFFICER'S ACTION

For official use only

(x) Approved- Permit number _____

() Denied _____

() Application is deficient _____

NOTES

By J. J. Amore Date 3/21/19
Tree Conservation Officer