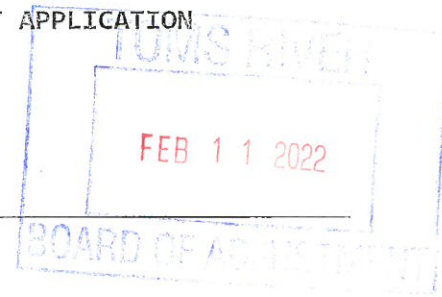


13766

TOWNSHIP OF TOMS RIVER
DEPARTMENT OF ENGINEERING AND COMMUNITY DEVELOPMENT
DIVISION OF LAND USE REGULATION
UNIFIED LAND DEVELOPMENT APPLICATION

PLEASE PRINT OR TYPE:



1. APPLICANT

NAME: 27 Washington ~~ST~~ Associates, LLC

ADDRESS: P.O. Box 5232 Toms River, NJ 08754

PHONE: 732-270-9690

FAX: 732-270-9691

E-MAIL: lgluck@gluck-allen.com

2. OWNER (IF DIFFERENT FROM APPLICANT)

NAME: Same as Applicant

ADDRESS:

PHONE:

FAX:

E-MAIL:

3. SUBJECT PROPERTY

STREET ADDRESS: 27 Washington Street

TAX MAP SHEET _____

TAX LOT 5 TAX BLOCK 662

APPROXIMATE SIZE 0.151 ACRES OR 6,585 SQ. FEET

ZONING DISTRICT VB - Village Business

EXISTING USE OF PROPERTY: Park

COPY OF DEED ATTACHED? YES X NO _____

DEED RESTRICTIONS: YES _____ NO X
(IF YES, PLEASE PROVIDE COPY)

4. BRIEF DESCRIPTION OF APPLICATION:

Amend Zoning Board Resolution #13596 approving a 6 story, 23 unit residential development with ground floor retail so as to permit amended architectural plans designed to accommodate "elevator roof area" and "public restrooms on roof" as required by condition #4 of said approval. The Zoning Board retained jurisdiction over this development pursuant to page 4, paragraph #6 of its memorializing resolution.

5.

REQUESTED APPROVAL (CHECK ALL THAT APPLY) _____

DEVELOPMENT PERMIT _____

SUBDIVISION CERTIFICATION

(N.J.S.A. 40:55D-56) _____

NON-CONFORMING USE CERTIFICATION
(N.J.S.A. 40:55D-68) _____

SUBDIVISION EXEMPTION CERTIFICATE
(N.J.S.A. 40:55D-7) _____

MINOR SUBDIVISION _____

PRELIMINARY MAJOR SUBDIVISION _____

FINAL MAJOR SUBDIVISION _____

CONDITIONALLY EXEMPT SITE PLAN _____

MINOR SITE PLAN _____

PRELIMINARY MAJOR SITE PLAN _____ X

FINAL MAJOR SITE PLAN _____ X

CONDITIONAL USE _____

SPECIAL REASONS VARIANCE FOR
COMMERCIAL USE, MULTI-FAMILY
USE OR RESIDENTIAL
SUBDIVISIONS _____

SPECIAL REASONS VARIANCE FOR
SINGLE OR TWO FAMILY RESIDENTIAL
USE _____ X
(N.J.S.A. 40:55D-70d)

SITE PLAN OR SUBDIVISION
ANCILLARY VARIANCE _____
(N.J.S.A. 40:55d-70c)

SINGLE UNDERSIZED RESIDENTIAL
LOT VARIANCE _____

SINGLE OR TWO FAMILY RESIDENTIAL
DETACHED GARAGE OR INGROUND
POOL VARIANCE

ALL OTHER SINGLE OR TWO FAMILY
RESIDENTIAL ACCESSORY STRUCTURES
(POOL, SHED, ETC,)

FENCE VARIANCE

SINGLE FAMILY ADDITION VARIANCE

APPEAL (N.J.S.A. 40:55D-70(A))

INTERPRETATION
(N.J.S.A. 40:55d-70(B))

EXTENSIONS OF PRIOR APPROVAL

INFORMAL MEETING

AMENDED RESOLUTION

SIGN VARIANCE

N.J.S.A. 40:55d-34/35 VARIANCE

ZONING CHANGE REQUEST

6. NUMBER OF PROPOSED LOTS

1

7. LIST ALL VARIANCES REQUIRED: (USE SEPARATE SHEET, IF
NECESSARY) D5 Height Variance

8. LIST ALL DESIGN WAIVERS REQUESTED:

NONE

9. ATTORNEY: D'Arcy, Johnson Day

NAME: Gregory J. Hock, Esq.

ADDRESS: 3120 Fire Road, Egg Harbor Township, NJ 08234

TELEPHONE: 866-327-2952

FAX:

E-MAIL

10. ENGINEER: Morgan Engineering, LLC

NAME: Mathew R. Wilder, P.E.

ADDRESS: 130 Central Avenue, Island Heights, NJ

TELEPHONE: 732-270-9690

FAX: 732-270-9691

E-MAIL mathew@morganengineeringllc.com

11. ARCHITECT: Yezzi Associates

NAME: Massimo Yezzi

ADDRESS: 18 Washington Street, Toms River, NJ

TELEPHONE: 732-240-3433

FAX:

E-MAIL info@yezziassociates.com

12. OTHER EXPERTS (USE ADDITIONAL SHEET IF NECESSARY)

NAME:

ADDRESS:

TELEPHONE:

FAX:

E-MAIL

13. PUBLIC WATER LINE AVAILABLE? YES X NO

14. PUBLIC SANITARY SEWER AVAILABLE? YES X NO

15. DOES APPLICATION PROPOSE A WELL AND SEPTIC? YES NO X

16. DESCRIBE ANY OFF TRACT IMPROVEMENT REQUIRED OR PROPOSED:

NONE

17. LIST ALL REQUIRED OUTSIDE AGENCY APPROVALS AND STATUS OF

SAME:

Ocean County Planning Board Fire Safety Review

Ocean County Soil Conservation District

Toms River Municipal Utilities Authority

18. LIST OF ALL MAPS, REPORTS AND OTHER MATERIALS SUBMITTED:

QUANTITY	DESCRIPTION OF ITEM	DATE OF ITEM
<u>5</u>	Application Forms	
<u>1</u>	W-9 Form	
<u>8 sets</u>	Surveys	
<u>8 sets</u>	Site Plans	
<u>11</u>	Site Plans - Reduced (11 x 17)	
<u>10 sets</u>	Architectural Plans	

19. APPLICANT'S CERTIFICATION:

I CERTIFY THAT THE FOREGOING STATEMENTS AND THE MATERIALS SUBMITTED ARE TRUE. I FURTHER CERTIFY THAT I AM THE INDIVIDUAL APPLICANT OR THAT I AM AN OFFICER OF THE CORPORATE APPLICANT AND THAT I AM AUTHORIZED TO SIGN THE APPLICATION FOR THE CORPORATION OR THAT I AM A GENERAL PARTNER OF THE PARTNERSHIP APPLICANT.

(IF THE APPLICANT IS A CORPORATION THIS MUST BE SIGNED BY AN AUTHORIZED CORPORATE OFFICER. IF THE APPLICANT IS A PARTNERSHIP, THIS MUST BE SIGNED BY A GENERAL PARTNER.)

SWORN TO AND SUBSCRIBED BEFORE ME THIS

30 DAY OF August, 2021

NOTARY PUBLIC

SIGNATURE OF APPLICANT

20. OWNER'S CERTIFICATION:

I CERTIFY THAT I AM THE OWNER OF THE PROPERTY WHICH IS THE SUBJECT OF THIS APPLICATION, THAT I HAVE AUTHORIZED THE APPLICANT TO MAKE THIS APPLICATION AND THAT I AGREE TO BE BOUND BY THE APPLICATION, THE REPRESENTATIONS MADE AND THE DECISION IN THE SAME MANNER AS IF I WERE THE APPLICANT.

(IF THE OWNER IS A CORPORATION THIS MUST BE SIGNED BY AN AUTHORIZED CORPORATE OFFICER. IF THE OWNER IS A PARTNERSHIP, THIS MUST BE SIGNED BY A GENERAL PARTNER.)

SWORN TO AND SUBSCRIBED BEFORE ME THIS

30 DAY OF August, 2021

NICOLE M. CARDONE
NOTARY PUBLIC
STATE OF NEW JERSEY
MY COMMISSION EXPIRES MARCH 5, 2024

NOTARY PUBLIC

SIGNATURE OF OWNER



TOWNSHIP OF TOMS RIVER

DEPARTMENT OF ENGINEERING AND COMMUNITY DEVELOPMENT

DIVISION OF LAND USE REGULATION

ESCROW REPLENISHMENT AGREEMENT

This agreement is made between the Township of Toms River ("Township") and 27 Washington ST. ASSOCIATES, LLC. ("Applicant"), and _____ ("Property Owner" if different from applicant), pursuant to the provisions of N.J.S.A. 40:55D-53.2(c).

The parties to this agreement acknowledge that the applicant has submitted an application for land development to the Toms River Township Planning Board or Board of Adjustment. In accordance with the requirements of the Toms River Township Escrow Fee Ordinance, the applicant has deposited the sum of \$ \$4,800.00 with the Township of Toms River to cover the cost and expenses of all reviews by the professionals retained by the applicable Board regarding the submitted application.

The applicant agrees that upon notification by mail from the Board Clerk that whenever the amount remaining in the escrow accounts drops to 25% of the original escrow fee, the applicant will agree to replenish the escrow account within ten (10) days from the date of the mailing of the notice to an extent equal to 50% of the original escrow fee. The applicant also agrees to pay any deficiencies in said account simultaneously. The applicant acknowledges that he/she has been provided with a copy of the Township Ordinance relating to the payment and replenishment of the aforesaid escrow review fees and agrees to otherwise fully comply with the requirements of the same.

In the event there is a failure to replenish the escrow account in accordance with the terms of the Agreement, the Township has the right to withhold the zoning permit or the issuance of Certificate of Occupancy until the deficiency is paid, and if the escrow review fees are not paid within 30

days of the billing date, the Township shall have the right to lien the property in the amount of the deficiency.

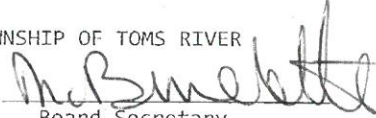


APPLICANT SIGNATURE
JAMES J. GLUCK

27 WASHINGTON ST. ASSOCIATES, LLC.
Print Applicant's Name

TOWNSHIP OF TOMS RIVER

By


Board Secretary

OWNER'S SIGNATURE
(if applicant is not property owner)

Print Owner's Name

TOWNSHIP OF TOMS RIVER PLANNING BOARD

PARTNERSHIP DISCLOSURE STATEMENT

27 Washington St Associates, LLC

NAME OF PARTNERSHIP: _____

STATE OF NEW JERSEY:

COUNTY OF OCEAN : S. S.

JAMES J. GLUCK, having been first duly sworn according to law, upon his/her oath, deposes and says:

1. I am a Partner in the above named Partnership. I am fully familiar with the facts concerning this Partnership as of the date of the application made before the Toms River Township Planning Board of which this Partnership Disclosure Statement constitutes a part.

2. The following information is submitted to the Toms River Township Planning Board, knowing that the Board relies upon the Truthfulness of the statements contained herein:

A.) NAME OF PARTNERSHIP: 27 Washington St Associates LLC

B.) REGISTERED AGENT OF PARTNERSHIP: Gluck & Allen, LLC

C.) PRINCIPAL OFFICE OF PARTNERSHIP:
217 Washington Street, Toms River, NJ 08753

D.) NAMES AND ADDRESSES OF PARTNERS AND PERCENTAGES HELD AS FOLLOWS:
James J. Gluck, 217 Washington Street, Toms River, NJ 08753 25%
Robert W. Allen, 217 Washington Street, Toms River, NJ 08753 25%
Frank Sadeghi, 130 Central Avenue, Island Heights, NJ 08754 25%
Michael Little, 738 Pheasant Hollow Lane, Toms River, NJ 08755 25%

BY: JAMES J. GLUCK Partner
DATE: _____

Sworn and scribed before me this 30th
day of AUGUST, 2021

Nicole M Cardone

Notary Public of the State of New Jersey

NICOLE M. CARDONE
NOTARY PUBLIC
STATE OF NEW JERSEY
MY COMMISSION EXPIRES MARCH 5, 2024