TOWNSHIP OF MARLBORO
(732) 536-0200
APPLICATION FOR ZONING APPROVAL

Permit # 02-7284

BLOCK 171 LOT 68 DAYTIME PHON[redacted] DATE 7/10/02

OWNER'S NAME ED KIRKWOOD

OWNER'S ADDRESS 25 HARBOR RD

WORKSITE ADDRESS (If Different) ______

Application is hereby made for a Zoning Permit in accordance with the requirements of the Township of Marlboro. The sub-joined statement and drawings submitted herewith are herby made a part of this application. I hereby agree to comply with all ordinances and governing regulations of the Township of Marlboro. If any use or building or structure applied for herein shall be in violation of the above, the zoning officer shall have the right to stop such use or work on the premises until such violation shall have been corrected and there shall be no liability on the part of the Township of Marlboro because of such stoppage.

CONTRACTOR'S NAME Self

ADDRESS ______

PHONE ______

Explain in detail the proposed construction: BUILD 6X30' DECK IN FRONT OF HOUSE With ROOF

State size of new construction (sq. ft.) and dimensions 6'X30' 180 SQ FEET

Attach two (2) copies of survey with proposed construction drawn in to scale. Survey must be up to date and must be certified by homeowner stating that, "This survey is a true and exact representation of my property as it exists today."

For Tenant Fit-Up: Name of Business ______ USE ______

New Construction: Model Name ______ Development ______

Attach two copies of reduced front elevation.

If "Look-A-Like", list three structural changes: 1. ______ 2. ______ 3. ______

R80 Zone

RECEIVED JUL 17 TWP. ...

AFFIDAVIT TO BE SIGNED BY APPLICANT

COUNTY OF MONMOUTH
:SS:
STATE OF NEW JERSEY

DATE: ______

I, ______, being of full age and duly sworn, depose and say that I am the owner in fee simple of the premises herein described and shown on the accompanying drawings, and that the use or occupancy herein described will be done in accordance with all laws and ordinances of the Township of Marlboro pertaining thereto.

All statements herein made by me are true to the best of my knowledge and belief.

[signature] Date June 24 2002
Signature of Applicant
or ______ Date ______
Signature of Agent
(If accompanied by authorization letter from homeowner)

Sworn to and Signature of Applicant
Subscribed before me this 24 day of June
JAMES M. CAPPUZZO JR
Notary Public, New Jersey
My Commission Expires January 30, 2003
[signature]
NOTARY PUBLIC

☆☆

(for office use only)

Approved: ______ Date ______
Zoning Officer

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DENIAL OF ZONING PERMIT (IF APPLICABLE)

undersized lot, insufficient front yard setback
84-29D(2)(7)

Sarah Paris Date 7/19/02
Zoning Officer