

TOWNSHIP OF MAPLE SHADE
Municipal Building
200 Stiles Avenue
Maple Shade, New Jersey 08052

PLANNING BOARD & ZONING BOARD APPLICATION FORM

The application, with supporting documentation, must be filed with the Township and must be delivered to the Board Attorney, Engineer and any other consultant designated by the Township for review at least fifteen [15] business days prior to the meeting at which the application is to be considered.

To be completed by Township staff only.

Date Filed	_____	Application No.	<u>ZBA-24-11</u>
Planning Board	_____	Application Fees	<u>\$ 900.00</u>
Zoning Board of Adjustment	<u> X </u>	Escrow Deposit	<u>\$ 6,000.00</u>

Scheduled for: Review for Completeness _____ Hearing _____

1. SUBJECT PROPERTY

Location: 447 Route 38

Tax Map	Page	<u>14</u>	Block	<u>141</u>	Lot (s)	<u>3</u>
	Page	_____	Block	_____	Lot (s)	_____

Dimensions Frontage 204.84 ft. Depth 197.72 ft. Total Area 18,530 s.f. (0.425 ac.)

Zoning District C General Commercial

2. APPLICANT

Name	<u>High Profile Maple Shade, LLC</u>
Address	<u>4420 Varsity Drive, Ann Arbor, Michigan 48108</u>
Email	<u>dod@delducalewis.com</u>
Telephone Number	<u>(856) 427-4200</u>

Applicant is a Corporation X Partnership _____ Individual _____

3. DISCLOSURE STATEMENT

Pursuant to *N.J.S.A.* 40:55D-48.1, the names and addresses of **all** persons owning 10% of the stock in a corporate applicant or 10% interest in any partnership applicant must be disclosed. In accordance with *N.J.S.A.* 40:55D-48.2 that disclosure requirement applies to any corporation or partnership which owns more than 10% interest in the applicant followed up the chain of ownership until the names and addresses of the non-corporate stockholders and partners exceeding the 10% ownership criterion have been disclosed. **[Attach pages as necessary to fully comply.]**

Please see enclosed ownership disclosure statement.

Name	Address	Interest
_____	_____	_____
Name _____	Address _____	Interest _____
Name _____	Address _____	Interest _____
Name _____	Address _____	Interest _____
Name _____	Address _____	Interest _____

4. If Owner is other than the applicant, provide the following information on the Owner(s):

Owner's Name	Duk J. & Jennifer A. Jhoo
Address	108 Wilson Lane, Berlin, NJ 08009
Email	DukJhoo@gmail.com
Telephone Number	_____

5. PROPERTY INFORMATION:

Restrictions, covenants, easements, association by-laws, existing or proposed on the property:

Yes [attach copies] ☒ No ☐ Proposed ☐

Note: All deed restrictions, covenants, easements, association by-laws, existing and proposed, must be submitted for review and must be written in easily understandable English in order to be approved.

Present use of the premises: Vacant Kay Bridal store

6. **Applicant's Attorney
(If Inc.)** Damien O. Del Duca, Esquire / Del Duca Lewis & Berr, LLC
- Address 21 E. Euclid Avenue, Suite 100
Haddonfield, NJ 08033
- Telephone Number (856) 427-4200
- Email dod@delducalewis.com
7. **Applicant's Engineer** Benjamin S. Crowder, P.E.
- Address 30 Garber Square
Ridgewood, NJ 07450
- Telephone Number (551) 307-1400
- Email bcrowder@bohlereng.com
8. **Applicant's Planning Consultant** N/A
- Address _____
- Telephone Number _____
- Email _____
9. **Applicant's Traffic Engineer** Rianna S. Kirchhof, P.E. / Dolan & Dean
- Address 181 West High Street
Somerville, NJ 08876
- Telephone Number (908) 927-0100
- Email rkirchhof@dolandean.com
10. List any other Expert who will submit a report or who will testify for the Applicant:
[Attach additional sheets as may be necessary]
- Name _____
- Field of Expertise _____
- Address _____
- Telephone Number _____
- Email _____

11. APPLICATION REPRESENTS A REQUEST FOR THE FOLLOWING:

SUBDIVISION:

_____ Minor Subdivision Approval

_____ Subdivision Approval [Preliminary]

_____ Subdivision Approval [Final]

Number of lots to be created _____
(including remainder lot)

Number of proposed dwelling units _____
(if applicable)

SITE PLAN:

_____ Minor Site Plan Approval

_____ Preliminary Site Plan Approval [Phases (if applicable) _____]

_____ Final Site Plan Approval [Phases (if applicable) _____]

 X Amendment or Revision to an Approved Site Plan

Area to be disturbed (square feet or acreage) _____ +/-0.25 acres

Number of proposed dwelling units (if applicable) _____ N/A

_____ Request for Waiver From Site Plan Review and Approval

Reason for request: _____

_____ Informal Review

_____ Request for Rezoning and/or Amendment to Master Plan

_____ Appeal decision of an Administrative Officer [N.J.S.A. 40:55D-70a]

_____ Map or Ordinance Interpretation or Special Question [N.J.S.A. 40:55D-70b]

 X Variance Relief (hardship) [N.J.S.A. 40:55D-70c(1)]

_____ Variance Relief (substantial benefit) [N.J.S.A. 40:55D-70c(2)]

_____ Variance Relief (use) [N.J.S.A. 40:55D-70d]

 X Conditional Use Approval [N.J.S.A. 40:55D-67]

Direct issuance of a permit for a structure in bed of a mapped street, public drainage way,
or flood control basin [N.J.S.A. 40:55D-34]

_____ Direct issuance of a permit for a lot lacking street frontage [N.J.S.A. 40:55D-35]

 X Other Relief [specify] Submission waiver approval

12. Section(s) of Ordinance from which a variance is requested:

Please see enclosed summary of application.

13. Waivers Requested of Development Standards and/or Submission Requirements:
[attach additional pages as needed]

No design waivers we are aware of currently. Submission waivers requested for site plan
checklist #9, 10, 19, and 34.

14. Attach a copy of the Notice to appear in the official newspaper of the municipality and to be mailed to the owners of all real property, as shown on the current tax duplicate, located within the State and within 200 feet in all directions of the property which is the subject of this application. The Notice must specify the sections of the Ordinance from which relief is sought, if applicable. **The publication and the service on the affected owners must be accomplished at least 10 days prior to the date scheduled by the Administrative Officer for the hearing.** An affidavit of service on all property owners and a proof of publication must be filed before the application will be complete and the hearing can proceed.

15. Explain in detail the exact nature of the application and the changes to be made at the premises, including the proposed use of the premises: [attach pages as needed]

Please see enclosed summary of application.

16. Is a public water line available?

Yes, no changes proposed

17. Is public sanitary sewer available?

Yes, no changes proposed

18. Does the Application propose a well and septic system? No
19. Have any proposed new lots been reviewed with the Tax Assessor to determine appropriate lot and block numbers? N/A
20. Are any off-tract improvements required or proposed? No
21. Is the subdivision to be filed by Deed or Plat? N/A
22. What form of security does the applicant propose to provide as performance and maintenance guarantees? Bond

23. Other approvals which may be required and date plans submitted:

	<u>Yes</u>	<u>No</u>	<u>Date Plans Submitted</u>
Maple Shade Water & Sewer Utility	<u> </u>	<u>X</u>	<u> </u>
Burlington County Health Department	<u> </u>	<u>X</u>	<u> </u>
Burlington County Planning Board	<u>X</u>	<u> </u>	<u>LONI to be submitted</u>
Burlington County Soil Conservation District	<u>X</u>	<u> </u>	<u>To be submitted</u>
NJ Council on Affordable Housing	<u> </u>	<u>X</u>	<u> </u>
NJ Department of Environmental Protection	<u> </u>	<u>X</u>	<u> </u>
Sewer Extension Permit	<u> </u>	<u>X</u>	<u> </u>
Sanitary Sewer Connection Permit	<u> </u>	<u>X</u>	<u> </u>
Stream Encroachment Permit	<u> </u>	<u>X</u>	<u> </u>
Waterfront Development Permit	<u> </u>	<u>X</u>	<u> </u>
Wetlands Permit	<u> </u>	<u>X</u>	<u> </u>
Tidal Wetlands Permit	<u> </u>	<u>X</u>	<u> </u>
Potable Water Construction Permit	<u> </u>	<u>X</u>	<u> </u>
Other <u> </u>	<u> </u>	<u> </u>	<u> </u>
NJ Department of Transportation	<u>X</u>	<u> </u>	<u>To be submitted</u>
Public Service Electric & Gas Company	<u> </u>	<u>X</u>	<u> </u>
<u> </u>	<u> </u>	<u> </u>	<u> </u>
<u> </u>	<u> </u>	<u> </u>	<u> </u>

24. List of Maps, Reports and other materials accompanying the application (attach additional pages as required for complete listing).

It is the responsibility of the applicant to mail or deliver copies of the application form and all supporting documents to the members of the professional staff [Engineer, Planning Consultant, Attorney for the Board to which the application is submitted] for their review. The documentation must be **received** by the professional staff at least fifteen [15] business days prior to the meeting at which the application is to be considered, otherwise the application will be deemed incomplete. A list of the professional staff is attached to the application form.

Quantity	Description of Item
_____	Please see enclosed cover letter.
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

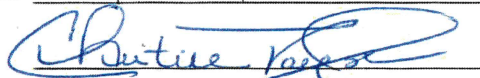
25. The Applicant hereby requests that copies of the reports of the professional staff reviewing the application be provided to the following of the applicant’s professionals:

Specify which reports are requested for each of the applicant’s professionals or whether all reports should be submitted to the professional listed.

	Applicant’s Professional	Reports Requested
<u> X </u>	Attorney	<u> All </u>
_____	Engineer	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

CERTIFICATIONS

26. It is hereby certified that all taxes, municipal liens, and utility charges on the subject property are paid and current as of: September 16, 2024


 MAPLE SHADE TAX COLLECTOR

27. 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
 _____ day of _____, 20 ____.

 NOTARY PUBLIC

 SIGNATURE OF APPLICANT

28. 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
 _____ day of _____, 20 ____.

 NOTARY PUBLIC

 SIGNATURE OF OWNER

29. I understand that the sum of \$ _____ has been paid to the Township of Maple Shade as a **Non-Refundable** Application Fee.

Date _____

 SIGNATURE OF APPLICANT

30. I understand that the sum of \$ _____ has been deposited in an escrow account (Builder's Trust Account). In accordance with the Land Development Ordinance of the Township of Maple Shade, I further understand that the escrow account is established to cover the cost of professional services including engineering, planning, legal, and other expenses associated with the review of applications for development, review and preparation of documents, inspection of improvements, the publication of the decision by the Board or other purposes under the provisions of the Municipal Land Use Law. Sums not utilized shall be returned. If additional sums are deemed necessary, I understand that I will be notified of the required additional amount and shall add that sum to the escrow account within fifteen (15) days.

Date _____

 SIGNATURE OF APPLICANT

CERTIFICATIONS

26. It is hereby certified that all taxes, municipal liens, and utility charges on the subject property are paid and current as of: _____

MAPLE SHADE TAX COLLECTOR

27. 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.]*

LESLIE M. MAZEN
NOTARY PUBLIC - STATE OF MICHIGAN
COUNTY OF LIVINGSTON

My Commission Expires February 15, 2028

Acting in the County of Washington

Sworn to and subscribed before me this
27th day of August, 2024

 NOTARY PUBLIC

 SIGNATURE OF APPLICANT John G. S.

28. 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
 _____ day of _____, 20____

 NOTARY PUBLIC

 SIGNATURE OF OWNER

29. I understand that the sum of \$ _____ has been paid to the Township of Maple Shade as a Non-Refundable Application Fee.

Date: _____

 SIGNATURE OF APPLICANT

30. I understand that the sum of \$ _____ has been deposited in an escrow account (Builder's Trust Account). In accordance with the Land Development Ordinance of the Township of Maple Shade, I further understand that the escrow account is established to cover the cost of professional services including engineering, planning, legal, and other expenses associated with the review of applications for development, review and preparation of documents, inspection of improvements, the publication of the decision by the Board or other purposes under the provisions of the Municipal Land Use Law. Sums not utilized shall be returned. If additional sums are deemed necessary, I understand that I will be notified of the required additional amount and shall add that sum to the escrow account within fifteen (15) days.

Date: _____

 SIGNATURE OF APPLICANT

CERTIFICATIONS

26. It is hereby certified that all taxes, municipal liens, and utility charges on the subject property are paid and current as of: _____

MAPLE SHADE TAX COLLECTOR

27. 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
_____ day of _____, 20 ____.

NOTARY PUBLIC

SIGNATURE OF APPLICANT

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Sworn to and subscribed before me this
28 day of August, 20 24.

NOTARY PUBLIC

SIGNATURE OF OWNER

29. I understand that the sum of \$ _____ has been paid to the Township of Maple Shade as a Non-Refundable Application Fee.

Date _____

SIGNATURE OF APPLICANT

30. I understand that the sum of \$ _____ has been deposited in an escrow account (Builder's Trust Account). In accordance with the Land Development Ordinance of the Township of Maple Shade, I further understand that the escrow account is established to cover the cost of professional services including engineering, planning, legal, and other expenses associated with the review of applications for development, review and preparation of documents, inspection of improvements, the publication of the decision by the Board or other purposes under the provisions of the Municipal Land Use Law. Sums not utilized shall be returned. If additional sums are deemed necessary, I understand that I will be notified of the required additional amount and shall add that sum to the escrow account within fifteen (15) days.

Date _____

SIGNATURE OF APPLICANT

CERTIFICATIONS

26. It is hereby certified that all taxes, municipal liens, and utility charges on the subject property are paid and current as of: _____

Tax certification to be provided.

MAPLE SHADE TAX COLLECTOR

27. 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
_____ day of _____, 20 ____.

NOTARY PUBLIC

SIGNATURE OF APPLICANT

28. 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.]*

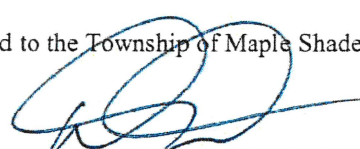
Sworn to and subscribed before me this
_____ day of _____, 20 ____.

NOTARY PUBLIC

SIGNATURE OF OWNER

29. I understand that the sum of \$ 100 has been paid to the Township of Maple Shade as a **Non-Refundable** Application Fee.

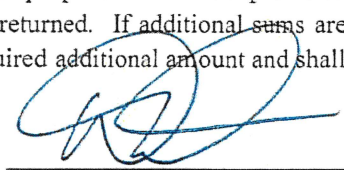
Date 8/28/24



SIGNATURE OF APPLICANT

30. I understand that the sum of \$ 500 has been deposited in an escrow account (Builder's Trust Account). In accordance with the Land Development Ordinance of the Township of Maple Shade, I further understand that the escrow account is established to cover the cost of professional services including engineering, planning, legal, and other expenses associated with the review of applications for development, review and preparation of documents, inspection of improvements, the publication of the decision by the Board or other purposes under the provisions of the Municipal Land Use Law. Sums not utilized shall be returned. If additional sums are deemed necessary, I understand that I will be notified of the required additional amount and shall add that sum to the escrow account within fifteen (15) days.

Date 8/28/24



SIGNATURE OF APPLICANT