

**Evesham Township
Zoning Permit**

Application #: **2034** Permit No: **20130656** Issue Date: **12/06/2013**

Construction Control Number :

Revision Date:

Block: **54.06** Lot **5**

Qualifier:

Voucher/Receipt #:	0
Check #:	1392
Amount collected:	\$40.00

Tenant:

Work Site: **65 STONE MOUNTAIN LANE**

Zone: **RD2**

Owner: **SIDERIS, KATHRINE K**

Agent **SIDERIS, KATHRINE K**

Address

Address: **65 STONE MOUNTAIN LANE**

City/State/Zip:

City/State/Zip: **MARLTON 08053**

Telephone: ____-____

This is to certify that the above-described premises together with any building thereon, are approved for use as indicated below and as depicted on the Plot Plan:

CONSTRUCT 10' X 16' SHED

Which is a:

- ☐ Use permitted by Zoning Ordinance, Article - Section -
- ☐ Use permitted by variance approved on _____, # _____ subject to any special conditions attached to the grant thereof.
- ☐ Valid nonconforming use as established by () findings of the Zoning Board of Adjustment or by () the undersigned zoning officer or by () Planning Board on the basis of evidence supplied by applicant. Conditions, if any:

☐ There is a nonconforming structure on the premises by reason of insufficient

☒ Other: EXISTING DRAINAGE GRADING PATTERNS SHALL NOT BE ALTERED
AS A RESULT OF WORK AUTHORIZED UNDER THIS ZONING PERMIT.

Begina Kinney (sk)
Nancy Jamarow

Zoning Official

This is NOT a Construction Permit

ZONING PERMIT APPLICATION

(IMPORTANT: READ INSTRUCTIONS ON REVERSE SIDE BEFORE FILLING IN APPLICATION)

** A COPY OF A PROPERTY SURVEY IS REQUIRED FOR SHEDS, POOLS, SPAS, FENCES, DECKS/PATIOS, ADDITIONS, ETC.

TOWNSHIP OF EVESHAM

Department of Community Development - 984 Tuckerton Road, Marlton, NJ 08053 Phone (856) 983-2914 Fax (856) 983-6709

1) BLOCK 54.06 LOT 5 IS THIS PROPERTY HISTORIC? NO

IS THIS AN AFFORDABLE HOUSING UNIT? NO IS THIS PART OF A HOMEOWNERS ASSOC.? NO

2) APPLICANT'S NAME: (Name of business or resident having work done. Do not put Contractor information here.)

GEORGE + KATHY SIDERIS

ADDRESS (Location of Work): 65 STONE MT LN

PHONE: [REDACTED] E-MAIL: GPSIDERIS@YAHOO.COM FAX:

DESCRIPTION OF WORK: SHED 10 X 16 ON STONE BASE

RECEIVED
DEC 14 2013
BY: _____

3) PROPERTY OWNER'S NAME: KATHLENE SIDERIS

(Entity or Person who owns Evesham property where work is being done.)

ADDRESS: 65 STONE MT LN

PHONE: 856 -

FAX:

CONTACT PERSON:

4) CIRCLE ONE PLEASE: I am the Property Owner, Contractor, Tenant, Other (specify _____) making this application. I hereby certify that the owner of record authorizes the proposed work and, as his/her/their agent, we agree to conform to all applicable laws and regulations of this jurisdiction.

Signature: [Signature]

Print Name: GEORGE SIDERIS

Date: 12/3/13

5) CONTRACTOR'S NAME: N/A

Contact Person:

ADDRESS:

PHONE:

FAX:

LICENSE #

ESTIMATED COST OF JOB: Sited \$2000 Stone \$500

6) SETBACKS (distance from property line): Front Line 200' Rear Line 200' Right Side Line 200' Left Side Line 25'

Fences: Height (front yard) _____ (side yard) _____ (rear yard) _____ Does fence enclose a pool? Yes _____ No _____

Is there a well and septic system on property? _____ If yes, show location and setbacks on survey.

FOR OFFICE USE ONLY

Proposed Project was approved by: Zoning Board _____ Planning Board _____ Other (specify) _____

Approval Date _____ Approval # _____

Application Approved by Zoning Officer: _____ Date: _____ MUA Approval _____ Date: _____

Application Approved with Conditions: _____

Application Denied: _____ Date: _____ Reason(s): Application Incomplete _____ Use Variance Required _____ Bulk Variance Required _____

Work requires prior approvals _____ Other _____

Cash _____ Check # 1292 Receipt # 23867 Zoning Permit # 2034 201301056 Initials: JK Date: 12-5-13

[Signature]
Authorized Signature

12-5-13
Date

Revised June 2012

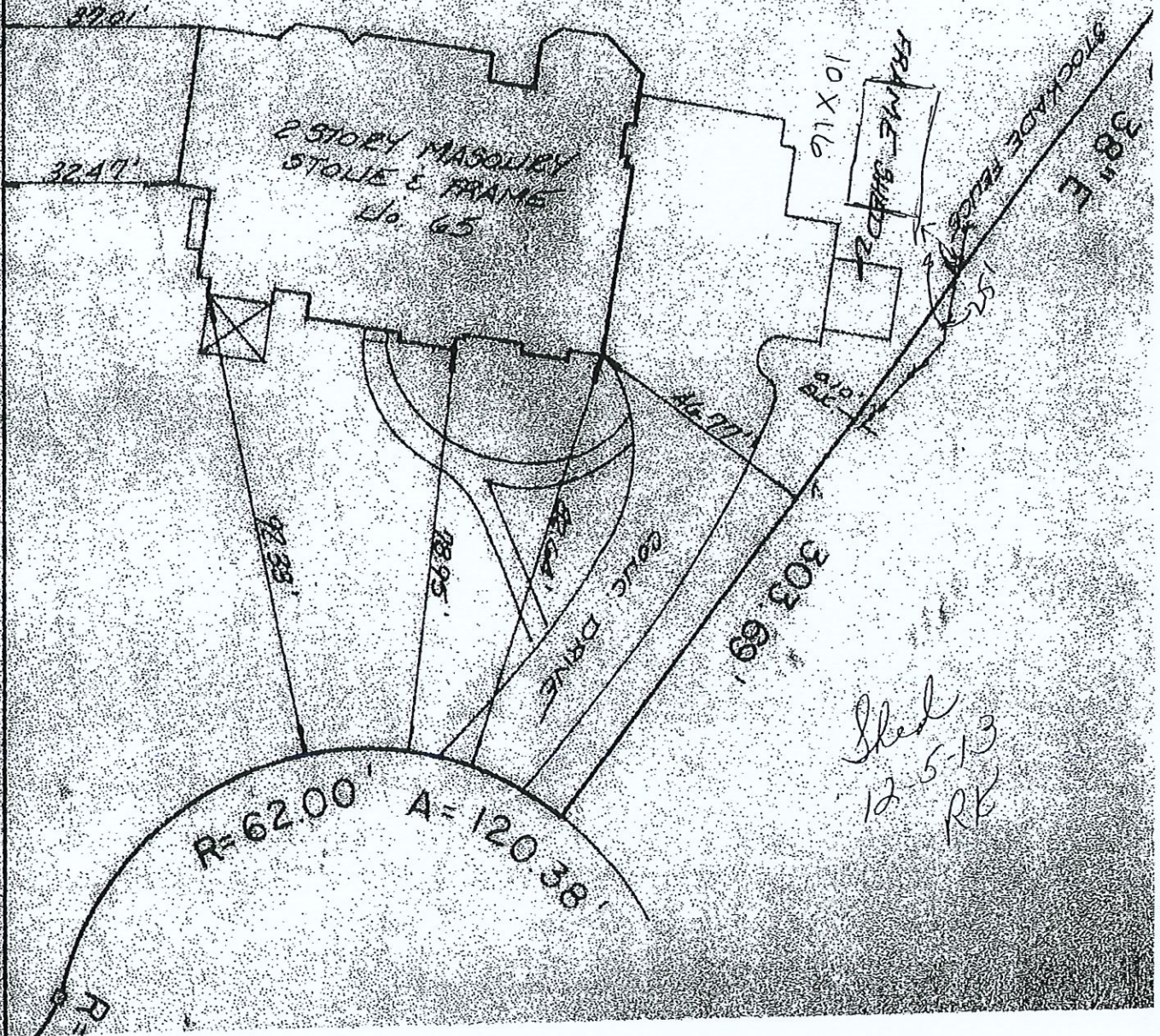
DRAWING
LL- 92

S 40° 26' 26" W

290.82'

P.O.B.

LOT 4



TOWNSHIP OF EVESHAM*Burlington County, New Jersey***ZONING PERMIT**Issued to: George & Kathy SiderisAddress: 65 Stone Mountain La.Block 54E Lot 5 Zoning Classification RA

This permit is issued in accordance with the application and drawings on file in this office, subject to the Evesham Township Zoning Code regulating the use and construction of property and buildings, and the following is a permitted use:

Addition of sitting room & bathroom & kitchenette

Conditions, if any:

This dwelling including the proposed addition may
only be occupied as a single family residence.

11/18/81 6/3/81

Certificate of occupancy No. 4258

	5.00
FEE: \$	10.00
	15.00

THIS IS NOT A CERTIFICATE OF OCCUPANCYSigned *Donna Stern*Date *6/3/81*

TOWNSHIP OF EVESHAM

Burlington County, New Jersey
RECEIVED

APPLICATION FOR ZONING PERMIT

JUN 3 1981

Block 54E

Lot 5

PLANNING BOARD

Date 6/1/81

Owner GEORGE + KATHY SIDERAS

Address 65 STONE MOUNTAIN LANE

Phone [REDACTED] Zoning Classification _____

Requested use of Property (Be specific) ADDITIONAL BED ROOM + SITTING ROOM TO BE ADDED TO EXISTING RESIDENCE. *Kitchen*

Applicants Signature [Signature]

Plot Plan showing existing buildings and proposed buildings including front, side and rear yard setbacks must be included.

This application has been examined and found to be in compliance with the Zoning Requirements of Evesham Township and a Zoning Permit can be issued.

Zoning Officers Signature [Signature] 6/3/81

This application is disapproved because of non-compliance with the following sections of the Evesham Township Zoning Code _____

Fees:

Zoning Permit \$ _____

____ Certificate of Occupancy
e \$5.00 each _____

Swimming Pool Bond if required _____

Total \$ _____

OFFICE USE ONLY

Zoning Permit # 0690

Issued _____

Exp. Date: _____

Rejected applications can be revised to comply with the Zoning Code or you may apply to the Zoning Board of Adjustment for relief on the Zoning Officers decision.

When a variance has been obtained, a copy of the resolution must be attached to the application.