

BOROUGH OF MADISON

Borough of Madison, 50 Kings Road, Madison, New Jersey 07940

APPLICATION FOR DEVELOPMENT

- Planning Board
- Board of Adjustment

App. Number: _____

Date of First Submission: _____

Valid Application Date: _____

Completeness Date: _____

1. PROPERTY INFORMATION

Address: 28 Stafford Drive, Madison NJ 07940 Zone: R-2

Tax Map Number: 30 Block: 3001 Lot(s): 39

Present Use: single-family residence

Has there been any previous application involving these premises by the applicant or any prior owner of the property? Yes No Unknown ; if unknown, provide copy of OPRA Request to Borough

If yes, nature of application, date and determination: _____

Does the applicant own adjacent property? Yes No If yes, address of property: _____

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

- Yes [attach copies]
- No
- Proposed

2. APPLICANT INFORMATION

Name: Alyson and William O'Connell

Address: 28 Stafford Drive

City/State/Zip: Madison, NJ 07940

Phone #: 973-738-2390 Fax: _____ Email: theoconnellfamily33@gmail.com

Applicant is a(n): Individual Partnership Corporation

CONTACT FOR APPLICATION

Name: Janet B. Siegel, Architect

Address: 17 Cook Avenue

City/State/Zip: Madison, NJ 07940

Phone #: 973-295-6963 Fax: _____ Email: janet@jbsarch.com

3. DISCLOSURE STATEMENT

Pursuant to end. 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 application must be disclosed. In accordance with N.J.S.A. 40:55D-48.2 that disclosure agreement applies to any corporation or partnership which owns more than 10% interest in the applicant followed up in 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 comply).

| | | |
|-------------|----------------|-----------------|
| Name: _____ | Address: _____ | Interest: _____ |
| Name: _____ | Address: _____ | Interest: _____ |
| Name: _____ | Address: _____ | Interest: _____ |
| Name: _____ | Address: _____ | Interest: _____ |
| Name: _____ | Address: _____ | Interest: _____ |

4. OWNER'S INFORMATION

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

Owner's Name: _____
Address: _____ Telephone Number: _____

OWNER MUST SIGN ATTACHED AUTHORIZATION

5. APPLICANT'S ATTORNEY (Corporations must be represented by an attorney)

Name: _____
Address: _____
Phone #: _____ Fax: _____ Email: _____

6. APPLICANT'S ENGINEER

Name: _____
Address: _____
Phone #: _____ Fax: _____ Email: _____

7. APPLICANT'S ARCHITECT

Name: Janet B. Siegel, Architect
Address: 17 Cook Avenue, Madison NJ 07940
Phone #: 973-295-6963 Fax: _____ Email: janet@jbsarch.com

8. NATURE OF THE APPLICATION (Check applicable items)

- | | |
|---|---|
| <input type="checkbox"/> Concept review | <input type="checkbox"/> Conditional use approval |
| <input type="checkbox"/> Minor subdivision | <input type="checkbox"/> Zone change |
| <input type="checkbox"/> Major subdivision, preliminary | <input type="checkbox"/> Site plan approval, preliminary residential |
| <input type="checkbox"/> Major subdivision, final | <input type="checkbox"/> Site plan approval, preliminary non-residential |
| <input type="checkbox"/> Use variance | <input type="checkbox"/> Site plan approval, final |
| <input type="checkbox"/> Variance, residential fence or deck | <input type="checkbox"/> Amendments to approved site plans |
| <input checked="" type="checkbox"/> Variance, other residential | <input type="checkbox"/> Change of permitted use with waiver of site plan |
| <input type="checkbox"/> Variance, other non-residential | <input type="checkbox"/> Appeal from administrative decision |
| | <input type="checkbox"/> Interpretation of zoning ordinance |

9. BRIEF DESCRIPTION OF PROJECT: Indicate type of improvement, alteration, structure, or use proposed; describe all structures, improvements, and uses now on the property. For any non-residential, business, or commercial use provide hours of operation, number of employees, number of parking spaces, intention to sell or rent, and any other information important for consideration:

2 story addition at rear of house and bracketed front portico

10. DOES THE APPLICATION COMPLY WITH ALL REQUIREMENTS OF THE ZONE: If not, state violation, article, section and variance requested and state principle points on which the variance request is made. Use a separate sheet if necessary. Attach any letter or document from the Zoning Official of the Borough of Madison which has been issued to you regarding this property.

Minimum front yard setback 195-29.3; Minimum rear yard setback 195-29.3; Max principal building coverage 195-29.3

11. LIST ANY OTHER LICENSES, PERMITS, OR OTHER APPROVALS REQUIRED BY MUNICIPAL, COUNTY, STATE, OR FEDERAL LAW AND THE STATUS OF EACH.

I hereby affirm that all of the above and statements contained in the papers submitted here with our true.

Signature of the Applicant: Alper O'Connell Date: 2/16/23

IF THIS APPLICATION IS SUBMITTED BY ANYONE OTHER THAN THE OWNER, THE OWNER MUST EXECUTE THE CONSENT WHICH IS ATTACHED TO THIS APPLICATION.

OWNER'S CONSENT TO APPLICATION


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).


Owner

Sworn to and subscribed before me this

23rd day of February, 2023.


A notary public of the state of New Jersey 036552007