

BOROUGH OF MIDLAND PARK

FOR OFFICE USE:

Dated Filed: _____ Completeness Review Date: _____

Notified Incomplete: _____ Deemed Complete: _____

Jurisdiction: Planning Board _____ Board of Adjustment _____

APPLICATION FOR DEVELOPMENT

SECTION I TYPE OF APPLICATION

- | | |
|---------------------------------------|---|
| _____ Preliminary Site Plan | _____ Appeal from Administrative Determination |
| _____ Final Site Plan | _____ Interpretation of Map or Ordinance |
| _____ Preliminary Major Subdivision | <input checked="" type="checkbox"/> Bulk Variance |
| _____ Final Major Subdivision | _____ Use Variance |
| _____ Amendment to Site Plan Approval | _____ Conditional Use Approval |
| _____ Waiver | _____ Exception |

SECTION II APPLICANT INFORMATION

see Addendum A to comply with N.J.S.A. 40:55D-48.1

NAME OF APPLICANT J. Timothy and Elizabeth Taolen

ADDRESS 121 Irving Street

PHONE # 201-315-6680 EMAIL taolen@verizon.net

NAME OF OWNER Same

ADDRESS _____

IF OWNER IS A CORPORATION: _____

PRESIDENT _____ SECRETARY _____

(UNLESS OTHERWISE NOTED, ALL CORRESPONDENCE WILL BE ADDRESSED TO APPLICANT)

INTEREST OF APPLICANT IN PROPERTY (IF NOT OWNER) _____

AUTHORIZED REPRESENTATIVE OF APPLICANT

NAME _____

ADDRESS _____

PHONE NO. _____ EMAIL _____

ATTORNEY FOR APPLICANT

NAME _____

ADDRESS _____

PHONE NO. _____ EMAIL _____

ENGINEER FOR APPLICANT

NAME _____

ADDRESS _____

PHONE NO. _____ EMAIL _____

ARCHITECT FOR APPLICANT

NAME _____

ADDRESS _____

PHONE NO. _____ EMAIL _____

SECTION III PROPERTY INFORMATION

ADDRESS 121 Irving Street
BLOCK 25.07 LOT 5 ZONE DISTRICT R-1

SIZE OF PROPERTY
SQ. FT. 8650 WIDTH 50' DEPTH 173'

EXISTING CONDITIONS
USE OF PROPERTY home

BUILDINGS
SQ. FT.: TOTAL: _____ BY FLOOR: 1. _____ 2. _____ 3. _____

SETBACKS: FRONT: _____ REAR: _____
SIDE 1 _____ SIDE 2 _____

HEIGHT: # of Feet _____ # of Stories _____

PROPOSED CONDITIONS
USE OF PROPERTY home

NEW BUILDING ADDITION TO EXISTING
SQ. FT.: TOTAL _____ BY FLOOR: 1. _____ 2. _____ 3. _____

SETBACKS: FRONT: _____ REAR: _____
SIDE 1 _____ SIDE 2 _____

HEIGHT: # of Feet _____ # of Stories _____

SECTION IV GENERAL

A. EXPLAIN IN DETAIL THE EXACT NATURE OF THE APPLICATION AND THE CHANGES TO BE MADE TO THE PROPERTY (ATTACH ADDITIONAL PAGES IF NECESSARY).

One story addition with porch and two steps

B. DOES THE APPLICANT OR OWNER OWN ANY CONTINGENT PROPERTY? NO
IF YES: ADDRESS _____ BLOCK _____ LOT _____
DESCRIBE USE: _____

C. ARE THERE ANY EXISTING COVENANTS, DEED RESTRICTIONS, EASEMENTS, OR EXCEPTIONS THAT ARE IN EFFECT?
DESCRIBE: NO
IF YES, PROVIDE A COPY OF EACH _____

D. IS PROPERTY LOCATED IN FLOOD HAZZARD OR FLOOD PLAIN? NO

E. DO PREMISES FRONT ON APPROVED STREET? _____ NAME: _____

F. DO PREMISES REQUIRE EXTENSION OF MUNICIPAL FACILITIES? NO
IF YES, DESCRIBE _____

G. HAS THEIR BEEN A PREVIOUS APPLICATION INVOLVING THIS PROPERTY? NO
IF YES, SET FORTH DATE, DESCRIPTION AND RESOLUTION _____

H. ARE ANY OFF-TRACT IMPROVEMENTS REQUIRED OR PROPOSED? NO

I. ARE ANY LOW-INCOME HOUSING UNITS PROPOSED? _____ YES X NO

J. IS A DEVELOPMENT FEE REQUIRED? _____ YES X NO

SECTION V VARIANCES, WAIVERS OR EXCEPTIONS

A. ARE ANY VARIANCES REQUESTED AS PART OF THIS APPLICATION? yes
IF YES, LIST SECTION NO. OF ZONING ORDINANCE AND DESCRIPTION:

<u>SECTION</u>	<u>DESCRIPTION</u>
	one story addition to be 14' from property line where 25' is required
	covered porch to be 6'8" from property line where 25' is required
	two steps to be 5'6" setback where 15' is required

USE ADDITIONAL SHEETS IF NECESSARY

B. ARE THERE ANY WAIVERS FROM THE SUBMISSION REQUIREMENTS REQUESTED? No
IF YES, LIST SECTION NO. OF ORDINANCE AND DESCRIPTION:

<u>SECTION</u>	<u>DESCRIPTION</u>

(THE PLANNING BOARD MUST APPROVE SUCH WAIVERS AS A CONDITION TO THE APPLICATION BEING DEEMED COMPLETE)

C. ARE THERE ANY EXCEPTIONS FROM THE DESIGN STANDARDS REQUESTED? NO
IF YES, LIST SECTION AND DESCRIPTION:

<u>SECTION</u>	<u>DESCRIPTION</u>

SECTION VI PLANS / DRAWINGS/REPORTS

LIST ALL PLANS SUBMITTED WITH THIS APPLICATION

TITLE	PREPARED BY	DATE
Side plan	Peter Cooper & Associates	4/4/23
Survey	GEOD Corporation	5/2/22

LIST ALL REPORTS SUBMITTED WITH THIS APPLICATION

TITLE	PREPARED BY	DATE

I HEREBY DEPOSE AND SAY THAT ALL THE FOREGOING STATEMENTS AND INFORMATION CONTAINED IN ANY PAPERS SUBMITTED HEREWITH ARE TRUE AND CORRECT.

Applicant

DATE:

2/14/24

Elizabeth Taden

SWORN AND SUBSCRIBE ON THIS

14th DAY OF February, 2024



AFFIDAVIT OF OWNERSHIP

(TO BE COMPLETED IF APPLICANT IS NOT OWNER)

STATE OF NEW JERSEY)

COUNTY OF BERGEN)

_____ of full age, having been sworn according to law on _____
deposes and says that _____ resides at _____
in the City of _____, in the County of _____ and the State of _____,
that is the owner-in-fee of all that certain lot, piece or parcel of land situated, lying and being in
the Borough of Midland Park aforesaid, and known and designated as Number _____ and Street _____
_____ hereby authorizes _____ to make the within application in
_____ behalf, and that the statements contained herein are true and correct.

[Handwritten Signature]
OWNER'S SIGNATURE

Dated: _____

SWORN & SUBSCRIBE ON THIS _____
DAY OF _____, 20 _____

NOTARY

[Faint background text and markings]

BOROUGH OF MIDLAND PARK

DISCLOSURE STATEMENT- APPENDIX A

NAME OF APPLICANT: _____

APPLICANT IS A CORPORATION PARTNERSHIP LIMITED LIABILITY COMPANY

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, PARTNERSHIP APPLICANT, OR LIMITED LIABILITY COMPANY APPLICANT MUST BE DISCLOSED. LIST NAMES, ADDRESSES AND INTEREST HERE.

NAME: _____ INTEREST % _____
ADDRESS: _____
CITY: _____ STATE: _____

NAME: _____ INTEREST % _____
ADDRESS: _____
CITY: _____ STATE: _____

N/A

NAME: _____ INTEREST % _____
ADDRESS: _____
CITY: _____ STATE: _____

NAME: _____ INTEREST % _____
ADDRESS: _____
CITY: _____ STATE: _____

PURSUANT TO N.J.S.A. 40:55D-48.2, IN THE EVENT THAT ANY OF THE ABOVE IS/ARE A CORPORATION, PARTNERSHIP OF LIMITED LIABILITY COMPANY, THE NAMES AND ADDRESSES OF PERSONS OWNING MORE THAN 10% OF THAT ENTITY MUST BE LISTED BELOW.

NAME: _____ INTEREST % _____
ADDRESS: _____
CITY: _____ STATE: _____

NAME: _____ INTEREST % _____
ADDRESS: _____
CITY: _____ STATE: _____

NAME: _____ INTEREST % _____
ADDRESS: _____
CITY: _____ STATE: _____

NAME: _____ INTEREST % _____
ADDRESS: _____
CITY: _____ STATE: _____