West Windsor Township

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Department of Community Development - Division of Land Use

DEC 1 2021

Power of Ferrior

ZONING BOARD OF ADJUSTMENT CHECKLIST

Bulk Variances ("C" type)
Use & Non-Use Variances ("D" type)

	Use & Non-Use Variances (D' type)
APPLICATION NAME: Ward	J. and Sharon H. S. Bulia. Princeton NJOSER
SUBJECT PROPERTY STREET ADD	RESSLOCATION: 217 Wishington RC, Princeton NJOSER
11 11 11	Since 10
Zoning District 12-70	Variance Requested (check all that appty, see Page 3 for december 2 C-1 D-1 D-2 D-5 D-6 D-6
An application shall not be considered the applicant receives a letter from the expression of the sent within 45 days	Cownship Land Use Division during "Open Window Week" (The week of the second Wednesday of complete until ALL the documents and information listed below have been submitted and Township Land Use Office decraing such application complete (letter decraing application complete from receipt of these submission requirements listed below).
	AL COPY OF THE INFORMATION REQUESTED BELOW:
Submission Requirements:	
Not Provided Applicable Waiver*	Towing Roard of Adjustment.
1.	Completed original "Application to West Windsor Zoning Board of Adjustment".
N.F2	Completed "c" Bulk Variance Application (if applying for "c" Variance). Completed "d" Variance Application (if applying for "d" Variance)
3.	Completed "d" Variance Application (9 9999 "a) Fees: Checks made payable to West Windsox Township.
4	The second services of
	B. Escrow Fee - per variance request, \$250.00 for "c" variance, 33,000.00 fee B. Escrow Fee Per variance request, \$250.00 for "c" variance, 33,000.00 fee S.
	Submit one (1) check for Apparents and some submitted maps, plans and documentation showing the One (1) original copy of folded and collated maps, plans and documentation showing the
	following: A. Key map with legible street plan showing location of subject property with north arrow.
V	A Key map with leginle street just and the street lines
	B. Accurate location of all property lines.
	C. Zoning classification of land. D. Tax map Block and Lot mumbers. D. Tax map Block and Lot mumbers.
	E. Location of existing and for proposed houses, statistically lines drawn to scale.
NA	F. For adjoining properties, distance from structures to meanest property.
.ik	G. Location of existing and/or proposed septic systems and wells on property.

West Windsor Township Zoning Board of Adjustment Checklist

Provided	Not Applicable	Waiver*		
í/				H. Acreage of property.
MA				Location of all easements, public right of way, greenbelt areas (as shown in the Conservation Element of the West Windsor Township Master Plan).
NA				 Identify any trees that will be removed by species and size (caliper).
				K. Existing and proposed floor plans indicating overall dimensions and square footage for each floor. All existing and proposed architectural elevations. Indicate height of structure as defined in section 200-4 (Building Height) of the West Windsor Township Land Use Ordinance. (2004 floor revolution miles)
			6.	Certification in writing from the Tax Collector that all taxes are paid in full for the current quarter.
/			7.	Photos of property and existing structure (four sides).
			8.	Completed Agreement to Pay for Professional Review and Inspections.
1			9.	Completed W-9 form.
	- —		10.	Completed Residential Conformity Checklist.
			11.	Acrial photograph of subject property including lots within 200 feet of subject property. (Acrials can be acquired on-line at google.com).
	J		12.	NIDEP Letter of Interpretation/presence or absence of wetlands.
			13.	For D-4, D-5 and D-6 Variances, please submit tax map showing size of lots, square footage of dwellings and as to the extent known, height of dwellings and submit photos of all such dwellings identified on lots on both sides of the street of the subject property for at least five hundred (500) feet on either side of the subject property.
The foll of the h	owing items earing (these	are necessi e items do n	क्य ब्यु ह	the Public Hearing and should be submitted to the Land Use Office by close of business of the day act the completeness of the application):
				Certified list of property owners within 200 ft. of subject property.
			_ В.	Original motice to property owners.
			_ C.	Affidavit of publication from The Princeton Packet.
			_ D.	owners and any green receipt cards from the post office.
			_ E.	Original of Affidavit of Proof of Service.

271 Clarksville Road, West Windsor, NJ 08550).

^{*}If waiver is requested, please strach written statement explaining why waiver should be granted.

^{* *}Once the initial copy of the application(s), plans and documentation has been submitted, the Land Use Office will review the package for accuracy. A letter will be then be sent to the applicant requesting any changes if necessary and indicating the total number of copies of documentation needed. When the requested copies are received by the Land Use Office, the application will be deemed complete and the application will be scheduled for the next available meeting of the Zoning Board of Adjustment. (The Zoning Board of Adjustment meets the first Thursday of each month at 7:30 p.m. at the West Windsox Township Municipal Building,

West Windsor Township

Department of Engineering and Community Development 271 Clarksville Road* P.O. Box 38*Princeton Junction*New Jersey 08550*(609)799-2400*FAX(609)275-4850

APPLICATION TO WEST WINDSOR ZONING BOARD OF ADJUSTMENT

FOR O	FFICIAL USE ONLY
Applic	ation Control Number:
Date A	pplication Filed:
*********	**************************************
SECTI	ON 1 - INFORMATION REGARDING THE APPLICANT
A]	The Applicant's full legal name is MARC T. SIBILIA
-	SHARON A. SIBILIA
D.	The Applicant's mailing address is 217 WASH/N671N RD
B]	PRINCETON, NI 0840
C]	The Applicant's telephone number is (732) 666-4649
D]	The Applicant's fax number is
E)	The Applicant is a: CORPORATION
•	The Applicant is a: CORPORATIONINDIVIDUAL (S)
	OTHER (please specify)
F]	If the Applicant is a corporation or a partnership, please attach a list of the names and addresses of persons having a 10% interest or more in the corporation or partnership.
G]	The relationship of the Applicant to the property in question is: OWNER
0,	OTHER (please specify)
н]	If the Applicant is not the owner of the property in question, the Applicant must obtain and submit a copy of this application signed by the owner in the space provided in Section 7B.
(N e	ote: If the applicant is a corporation seeking relief under N.J.S.A. 40:55D-70 et seq., then the Applicant must be represented by a New Jersey Attorney).

SECTION 2 - INFORMATION REGARDING THE PROPERTY

A]	The street address of the property is 217 WAS HINGTON RD.
~ j	PRINCETON, NJ 08540
B]	The tax map Block Number (s) 42; the Lot Number (s) is
C]	The zone in which the property is located is $R-2$
D]	The dimensions of the property are
E]	The size of the property is 16,500 square feet/acre(s).
F)	Road frontage of the property is 100 60 feet
G]	The property is located:
	1. within 200 feet of another Municipality
	2. adjacent to an existing or proposed County road
	3. adjacent to a State highway
	(If any of the above apply, please make sure that all proper jurisdictional authorities ARE properly noticed and served - If there is any doubt on who should be notified, please contact the Planning/Zoning Office).
H]	Have there been any previous Zoning Board of Adjustment or Planning Board hearings involving this property: YESNO
1]	If the answer to "H" is YES, attach a copy of the written decision (s) adopted by the applicable Board.

SECTION 3 - INFORMATION ABOUT REQUESTED RELIEF

A]	NATURE OF APPLICATION 1. Type of Variances:
	"A" VarianceAppeal of Zoning OfficerAppeal of Alleged Error
	"B" Variance Interpretation of Development Ordinance (Subdivision, Site Plan, Zoning)
	"C" Variance
	Bulk Variance (dimensional)
	"D" Variance
	Variance including, but not limited to a use or structure not permitted in a Zoning District Floor Area Ratio, Density
	Subdivision b] Subdivision Application to follow
	3. a] Site Plan b] Site Plan Application to follow
	4. Waiver of lot street frontage requirement
	5. Exception to the official map
B]	Please attach one copy of the following forms depending on the type of application being
-•	made: 1. (a) Appeal of Zoning Officer (b) Appeal of Alleged Error
	(a) Interpretation of Development Ordinance (b) Interpretation of Zoning
	3. Bulk Variance (dimensional)
	 Variance including, but not limited to a use or structure not permitted in a zoning district; Floor Area Ratio, or Density

SECTION 4 - INFORMATION ABOUT EXPERTS

The following information, although not required, is respectfully requested to enable the Board to facilitate the processing of this application.

A]	Applicant's Attorney: Name					
	Address					
	Phone	Fax	E-Mail			
B]	Applicant's Engineer: Name					
	Address					
	Phone	Fax	E-Mail			
C]	Applicant's Architect:					
	Address					
	Phone	Fax	E-Mail			
D]	Applicant's Planner: Name					
	Address		E-Mail			
	Phone	Fax	E-Mail			
E]	Other Experts: Name					
	Address		E-Mail			
	Phone	Fax	E-Mail			
****	*******	************	***************************************			
SEC	TION 5 SUBMISSION	OF APPLICATION:				
	1 14 (4) comunof	the following material to	the Planning/Zoning Office during "Open Window"			
Plea wee	se submit one (1) copy of k, which is the week of the	second Wednesday of	each month:			
A]	Application - 9	signed (copy of agreeme	nt with owner if being purchased)			
B]	One (1) set of features involved structures and	drawings (to scale) show the discount of particular distances between vari	wing all adjoining properties affected and all resent and proposed buildings, location of all ous structures and property lines, parking layout,			
C]	etc.) One (1) set of Variance) [Or receive a cert	etc.) One (1) set of applications as required by Section 3 (B) (Request for A, B, C or D Variance) [Once your application is received by the Planning and Zoning office you will receive a certified letter from the Director of Community Development outlining what, if any, changes are required. Application and escrow fee amounts and number of copies applications and plans needed to be deemed complete will be outlined in said letter].				

SECTION 6 - COMPLETE APPLICATION

Once a	n application has been deemed complete, the following items need to be addressed at least 10 ior to your meeting date.
A]	"Notice" of all property owners within 200 feet via "Certified Mail – Return Receipt Requested"
B]	Copy of notice to the official newspaper of the West Windsor Township Zoning Board of Adjustment (contact the Planning & Zoning Office for the name of the official newspaper)
C]	Notification of State or County if proposed application borders State/County Road, or is within 200 feet of such roadway
D]	Notification of adjoining County or Municipality if proposed application is located within 200 feet of the proposed application.
A com	plete application requires the following submissions to the Planning/Zoning Office at least 3 days the scheduled meeting date.
A]	Return receipts from Certified letters
Вј	Notarized Proof of Service
C]	Proof of Publication (To be provided by the newspaper to which the notification was sent)
D)	Person other than the owner makes a letter or power of attorney, in case appeal is made by person other than owner
*****	TION 7 - VERIFICATION AND AUTHORIZATION
SEC	
A]	Applicant's Verification:
conta the fo	I hereby certify that the above statements made by me and the statements and information ained in the papers submitted in connection with this application are true. I am aware that if any of pregoing statements are false, I am subject to punishment.
	Applicant's Signature
B]	Owner's Authorization:
app	I hereby certify that I reside at 217 WASHINGTON 20 PRINCEDON e County of MERCED and State of New Tersel and that I am owner of all that certain lot, piece or parcel of land known as Block (s) 42 on the Tax Map of West Windsor, which is the subject of the above lication, and that said application is hereby authorized by me.
<u>AM</u> wO	ner's Name (PRINTED) Cell Owner's Signature ner's Telephone and Fax number 132-666-4649 Marc. SI bilic & gmail. Com we don't
Ow	ner's Telephone and rax number
	have a fax

SECTION 8 ADDITIONAL ITEMS:

Applicants, please take note of the following additional procedural requirements:

- All certified lists of property owners with 200 feet of the proposed application must be requested in writing from the Planning/Zoning Office. A fee of \$10.00 or \$.25 per lot, whichever is greater, is required for this service.
- B] Any use or "D" variance application requires the recordation of the hearing by a certified court reporter in accordance with a Resolution passed by the Zoning Board of Adjustment on November 8, 1978. The cost of such reporter must be borne by the applicant.
- C] Any corporate applicant seeking relief from the Zoning Board of Adjustment must be represented by a New Jersey Attorney.
- D] Attached is a sample notice form for all properties located within 200 feet of the proposed application.
- E] Attached is a Proof of Service form to be filled out by all applicants.

West Windsor Township

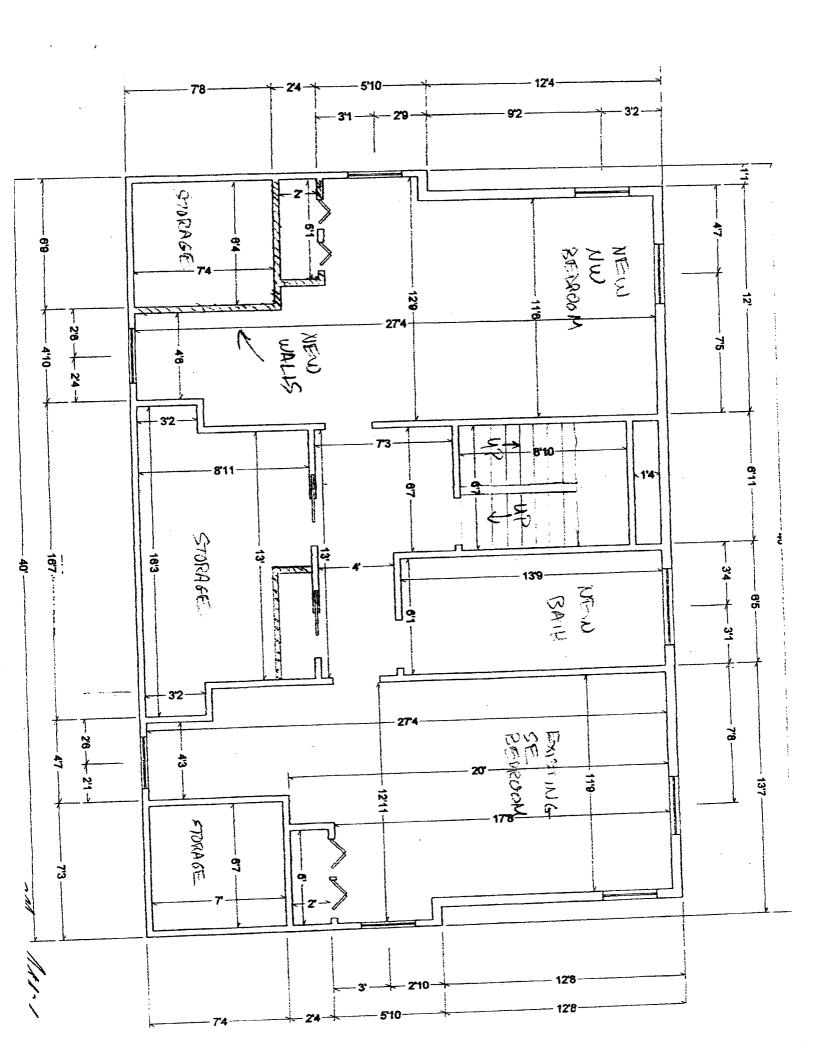
Department of Community Development - Division of Land Use

REQUEST FOR VARIANCE INCLUDING, BUT NOT LIMITED TO A USE OR STRUCTURE NOT PERMITTED IN A ZONING DISTRICT, N.J.S.A. 40:55d-70d

(For "d" Use and Non Use Variance)

ATTACH TO ZONING BOARD APPLICATION	CONTROL NO. 23 22-21
Property Location 217 WASH/WGTOV RD. Map Block 42 Lot 7	
COMPLETE A - E, (Attach support documents as required)	
A - Describe below the specifics of the variance request. ADD A BEDRUOM AND A BATHROOM SPACE, 361 FT ² BRINGS FAR TO 19 ALLOWED. NO EXTERNAL CHANGES	1.3%, 1.3% ABOVE 13%
B - Describe below the special reasons which exist that support the games of the support the support the games of the support the support the games of the support the	(15.3%), 14 FARVIEW (15.5%), 195 VARSITY (16.3%). PENN'S NECK- the variance request.
IT WILL ALLOW US TO CONTINUE - WHO LOST HER JOB DUE TO THE PAN A DEDIDICATED CIVIL FUGINE - RING AND THEIR UNBORN CHILD, DUE	STUDENT AT RUTGERS,

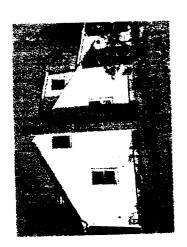
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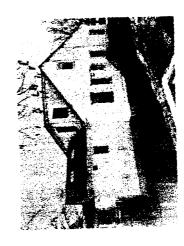
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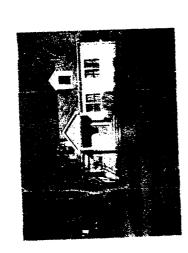
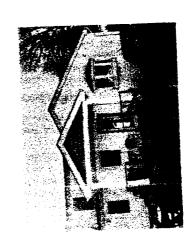


Chart-



Dack

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STA.

A WAIVER WAS OBTAINED TO THE SETTING OF PROPERTY CORNER MARKERS.

CERTIFIED CORRECT TO

MARC J. SIBILIA Q J SHARON ARCHER-SIBILIA
COUNTRYWIDE MORTGAGE CORPORATION, INC. and/or
THEIR ASSIGNS AS THEIR INTEREST MAY APPEAR
MERCER TITLE SERVICES AGENCY, INC.
STULIRT SURICK, ESQUIRE

TAX MAP DATA

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DLOCK/SECTION 42
SHEET 4.02

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	FOR	ON I
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Date 10 18 194 Scale 1"= 40"	Drawn J Z J Charted With	JI SI
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