



BOROUGH OF BAY HEAD
Planning Board
83 Bridge Ave., P.O. Box 248
Bay Head, NJ 08742
732-892-0638 Fax: 732-899-6494

DEVELOPMENT APPLICATION

Application No. 2023-03

See the Development Application Instructions & Filing Procedures for detailed instructions on completing this application. This application, together with the required fee, attachments and supporting documentation, must be filed with the Board Clerk no later than twenty-one (21) days prior to the scheduled Board meeting date. If this application involves erecting a new structure or substantial alteration of an existing structure, applicants should consult with the Construction Official for compliance with the Borough's Flood Plain Regulations prior to filing this application.

APPLICANT INFORMATION

Applicant Name: Eric & Jennifer Sheffield
Address: 167 Park Avenue
City, State & Zip: Bay Head, NJ 08742
Telephone: () 917-371-3450 Fax: () e.sheffield@esarchitect.com

If the applicant is not the Property Owner, the PROPERTY OWNER AUTHORIZATION section must be completed. Applicant is:

☒ Property Owner ☐ Tenant ☐ Contract Purchaser ☐ Other: _____

If the applicant is a corporation or partnership, the name, address and percentage of ownership of all persons owning 10% or more of the corporate stock or partnership interest must be disclosed. Applicant is:

☒ Individual(s) ☐ Corporation ☐ Partnership ☐ Other: _____

PROPERTY INFORMATION

Street Address: 167 Park Avenue Block: 12 Lot: 26
Lot Dimensions (feet): 50.0x140.0 Lot Area (square feet): 7000 Corner Lot: ☐ Yes ☒ No
Zoning District: ☒ R-50 ☐ R-10 ☐ B-1 ☐ B-2 ☐ B&B ☐ Conservation
Number of Buildings (including garages and storage sheds): 2 Swimming Pool: ☐ Yes ☒ No
Current Use: ☐ Vacant
☒ Single Family Residence
☐ Multi-Family Residence.....# of Dwelling Unites: _____
☐ Commercial.....# of Units: _____ Total Gross Floor Area (Square Feet): _____
☐ Hotel, Bed & Breakfast...# of Dwelling Units (Including Efficiencies): _____ # of Rooms: _____
☐ Other: _____
Proposed Use: _____

- ☐ Yes ☒ No Does the proposal increase the present number of uses or dwelling units located on the property or within any building?
- ☐ Yes ☒ No Have there been any previous Planning Board (or former Zoning Board of Adjustment) hearings involving the subject property? If yes, attach a copy of the written decision(s).
- ☐ Yes ☒ No Are there any deed restrictions, covenants or easements affecting the subject property? If yes, attach a copy.
- ☐ Yes ☒ No Does applicant own adjacent property?
- ☐ Yes ☒ No Is adjacent property vacant?

Check all applicable items.

- ☐ Property is located within 200 feet of Borough of Mantoloking.
- ☐ Property is located within 200 feet of the Borough of Point Pleasant.
- ☐ Property is located within 200 feet of the Borough of Point Pleasant Beach.
- ☐ Property is located adjacent to a County Road.
- ☐ Property is located adjacent to a State Highway.

PROPOSAL INFORMATION. Summarize the proposed physical changes and use of the property.

Applicant proposes to expand existing 2nd story dormer and add a 1/2 story above. Replace existing front entry stairs. Existing home has non-conforming front setback. New dormer expands this non - conforming setback 10.9 ft where 20.0ft is required. All existing setbacks are maintained.

LOT INFORMATION

	Required	Feet	Current	Proposed
Lot Width	n/a	Min.	50	50
Lot Depth	n/a	Min.	n/a	n/a
Lot Area	5000	S.F. Min.	7000	7000

ON-SITE PARKING INFORMATION

	Required	Current	Proposed
Parking Space	2 Min.	3	3

BUILDING INFORMATION

	Required	Feet	Current	Proposed
Front Yard	20ft	Min.	10.9ft	10.9ft
Rear Yard	10ft	Min.	78.4ft	78.4ft
Side Yard #1	6.0ft	Min.	11.2ft	11.2ft
Side Yard #2	10ft	Min.	12.8ft	12.8ft
Bldg. Height	32.5ft	Max.	24.0ft	29.3ft
Bldg. Cov.	35	% Max	33.5%	33.5%
Accessory Bldg.	4.0ft	Min.	4.12ft	4.12ft

BUILDING INFORMATION – Corner Lots Only

	Required	Feet	Current	Proposed
Front Yard #1		Min.		
Front Yard #2		Min.		
Side Yard #1		Min.		
Side Yard #2		Min.		
Bldg. Height		Max.		
Bldg. Cov.		% Max		
Accessory Bldg.		Min.		

ACTION REQUESTED

- ☐ Appeal Alleging Zoning Officer Error
 (N.J.S.A. 40:55D-70a)
☐ Interpretation of Zoning Map or Zoning Ordinance &
 Special Questions (N.J.S.A. 40:55D-70b)
☒ Request for "Bulk Variance" (N.J.S.A. 40:55D-70c)
☐ Request for Use Variance (N.J.S.A. 40:55D-70d)
☐ Request to Direct Issuance of a Permit to Build in Bed
 of Mapped Street (N.J.S.A. 40:55D-76a-1)
☐ Request to Direct Issuance of a Permit to Build on Lot
 not Abutting a Street (N.J.S.A. 40:55D-76a-2)
☐ Request for Issuance of Certificate of Non-
 Conforming Use (N.J.S.A. 40:55D-68)
☐ Conditional Use Approval (N.J.S.A. 40:55D-67)
☐ Waiver of Required Submissions
☐ Extend Time period for Previously approved
 Application

___ OTHER: _____

Major Site Plan Approval:

- ☐ Informal Review
☐ Preliminary Plat
☐ Final Plat
☐ Combined Preliminary & Final Plat
☐ Amended Preliminary & Final Plat
☐ Request for Exception to Site Plan Requirements &
 Standards (N.J.S.A. 40:55D-51b)
☐ Minor Subdivision Approval
 Major Subdivision Approval:
☐ Informal Review
☐ Preliminary Plat
☐ Final Plat
☐ Combined Preliminary & Final Plat
☐ Request for Exception to Subdivision Requirements &
 Standards (N.J.S.A. 40:55D-51a)

REASONS FOR APPROVAL(S). Summarize the reasons why the variance or other requested approval(s) can be granted without substantial detriment to public good or substantial impairment to the intent and purposes of the zone plan and zoning ordinance.

The addition of a dormer will increase the bedroom area on the second floor.
 Expansion will occur within the existing footprint. The new dormer will replace 2 existing
 smaller dormers. New improvements will enhance the street side facade of the home.
 All existing setbacks are maintained. Reconfigure existing front entry stairs, 5.0 ft existing
 front setback, 6.6 ft proposed.

APPLICATION ATTACHMENTS. Please check all items which are attached to the application.

- ☒ Application Fee & Escrow Deposit Application Fee: \$ 250.00 Escrow Deposit: \$ 750.00
☒ Tax Collector Certification
☒ Zoning Officer Denial (for variance applications or Zoning Officer Appeal)
☒ Property Survey (all applications)
☒ Plot Plan
☒ Architectural Elevations and Floor Plan
☒ Photos of Property
☐ Environmental Impact Report (Site Plan Applications)
☐ Site Plan (Site Plan Applications)
☐ Subdivision

APPLICANT EXPERTS. (If applicable)

Attorney Joseph Michelini, Esq.
Address O'Malley Surman & Michelini
 17 Beaverson Blvd. PO Box 220
 Brick, NJ 08723
Phone () 732-477-4200
Fax () Jmichelini@osm-law.com

Engineer Robert Harrington, P.E.
Address East Coast Engineering, Inc.
 508 Main Street,
 Toms River NJ 08753
Phone () 732-244-3030
Fax () rob.harrington@eceinc.net

Architect Eric Sheffield (homeowner)
 Address 164 West 79th Street Apt. 16D
New York, NY 10014

Phone () 917-371-3450
 Fax () _____

Other _____
 Address _____

Phone () _____
 Fax () _____

PROPERTY OWNER AUTHOTIZATION. If the Applicant is not the property owner, provide the following information:

Property Owner Name: Eric & Jennifer Sheffield
 Address: 167 Park Avenue, Bay Head, NJ 08724

Subject to applicable penalties, I hereby certify the statements and information submitted with this application are true; that all surveys, plot plans and drawings accurately reflect the current condition of the subject property and I am the owner of the property which is the subject of the within application, and that said application is hereby authorized.

Date

6/13/22

Signature of Property Owner or Authorized Agent

REVIEW FEE ESCROW AGREEMENT & APPLICANT CERTIFICATION

Subject to applicable penalties, it is hereby certified the foregoing statements and information submitted with this application are true and that all surveys, plot plans and drawings accurately reflect the current conditions of the subject property. It is further certified the undersigned is the applicant, a general partner of partnership applicant or an authorized officer of a corporate applicant.

CHECK IF APPLICABLE ☐ I hereby certify the plans and specifications which accompany this application were prepared by me, as I am acting as the design of said building/alterations which is to be constructed by myself for my own occupancy or occupancy by my immediate family. The phrase "constructed by myself" does not mean that I intend to personally do the work but that I am the person undertaking the work as owner and principal.

In accordance with §18-59B (Schedule of Fees) of the Bay Head Land Use Ordinance, the applicant agrees to pay an amount equal to the fee(s) which the Planning Board pays to a professional engineer or planner to review the Development Application and agrees to pay an initial deposit and such other additional deposits as may be required to offset these special review costs incurred by the Planning Board. The Planning Board shall not be required to process the application or take further action in the application until such additional deposits are made by the applicant. In the event that additional deposits requested by the Planning Board remains unpaid for a period of sixty (60) days, this development application shall be deemed to be withdrawn and shall be dismissed without prejudice by the Planning Board. In the event the fees imposed are not paid, any development approvals granted shall be considered null and void.

Sworn to subscribed before me this 13th
 day of June 2022

Lesley B. Glazer-Pomeranz
 Notary Public

LESLEY B. GLAZER-POMERANZ
 Notary Public, State of New York
 Reg. No. 01GL6054734
 Qualified in New York County
 Commission Expires Feb. 12, 2023

Signature of Applicant or Authorized Agent

FOR OFFICE USE ONLY

Applicant Name: Eric & Jennifer Sheffield Block 12 Lot 26
Application No.: _____
Date Application Filed: _____
Date Application Certified Complete: _____
Scheduled Hearing Date: _____

Calculation of Application Fee & Escrow Deposit	Application Fee	Escrow Deposit	Total
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
Totals	_____	_____	_____

Payments Received

Date	Cash/Check No.	Amount
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Professional Costs Charged to Escrow Deposit		Total Escrow Deposit	\$ _____
Date	Description	Amount	
_____	_____	_____	
_____	_____	_____	
_____	_____	_____	
_____	_____	_____	
_____	_____	_____	
_____	_____	_____	

Refund of Escrow Deposit		Refund Due	\$ _____
Date	Resolution No.	Check No.	Amount
