



# BOROUGH OF METUCHEN

MIDDLESEX COUNTY

Tel. (732) 632-8540 • Fax (732) 632-8100 • 500 Main Street • Metuchen, N.J. 08840

## APPLICATION FOR DEVELOPMENT

### Control Information (Office Use Only)

Application Number	Applicant Name	Date Received	Date Deemed Complete
10-15-15	John J. ...	5-15-15	5-15-15

### 1. Application

#### A. Location

- ✓ Street Address 206 High Street, Metuchen, NJ 08840
- ✓ Block 140 Lot 62.01 Zone R-2
- ✓ Situated on North side of High Street
- ✓ distant 0 feet feet from Newman Street

#### B. The Site is Located:

- ✓  Within 200' of Edison Township     Adjacent to County Road     Adjacent to State Highway

#### C. Status:

- ✓  New     Revision or Resubmission of Prior Application No. \_\_\_\_\_

#### D. Type (Check all that Apply):

- Concept     Preliminary     Final     Conditional Use Approval
- Minor Site Plan     Major Site Plan     Minor Subdivision     Major Subdivision
- (a) - Appeal     (b) - Interpretation     (c) - Variance (Bulk)     (d) - Variance (Use)
- Request for Waiver of Submission Requirements     Other \_\_\_\_\_

#### E. Nature of Relief or Variance Request (List Ordinance Reference Sections)

- ✓ Sec. 110-112.2.B.(1)(a) for fence height and lack of 50% openness
- ✓ Sec. 110-112.2.B.(3) setback distance of side/rear yard from secondary street

#### F. Date and Disposition of any previous Board Hearings involving this Site

- ✓ N/A

#### G. Plat Submission (List maps and other exhibits accompanying this application)

- ✓ narrative, survey, site plan, photos/renderings

**2. Applicant Information**

**A. Applicant**

First Name Christine Phone 516-220-5249  
Last Name Egan Phone \_\_\_\_\_  
Street Address 206 High Street Fax \_\_\_\_\_  
City / State Metuchen, NJ Zip 08840 Email 30parisi@gmail.com

**B. Applicant is a/an:**

Individual     Partnership     Corporation     Other \_\_\_\_\_

**C. Applicant's Relationship to Owner:**

Owner     Lessee     Purchaser Under Contract     Other \_\_\_\_\_

**D. Owner** (If other than Applicant; requires Owner's Consent on Page 6)

First Name Same as Applicant Phone \_\_\_\_\_  
Last Name \_\_\_\_\_ Phone \_\_\_\_\_  
Street Address \_\_\_\_\_ Fax \_\_\_\_\_  
City / State \_\_\_\_\_ Zip \_\_\_\_\_ Email \_\_\_\_\_

**3. Applicant's Experts**

**A. Attorney** (Required if Applicant is a Corporation; must be a licensed in the State of New Jersey)

Name N/A Phone \_\_\_\_\_  
Street Address \_\_\_\_\_ Fax \_\_\_\_\_  
City / State \_\_\_\_\_ Zip \_\_\_\_\_ Email \_\_\_\_\_

**B. Engineer**

Name N/A Phone \_\_\_\_\_  
Street Address \_\_\_\_\_ Fax \_\_\_\_\_  
City / State \_\_\_\_\_ Zip \_\_\_\_\_ Email \_\_\_\_\_

**C. Architect**

Name N/A Phone \_\_\_\_\_  
Street Address \_\_\_\_\_ Fax \_\_\_\_\_  
City / State \_\_\_\_\_ Zip \_\_\_\_\_ Email \_\_\_\_\_

**D. Other Professional Consultants**

Name Brunswick Surveying Phone 732-752-0100  
Street Address 61 Stelton Road Fax \_\_\_\_\_  
City / State Piscataway, NJ Zip 08854 Email brunswick.surveying@gmail.com

**4. Plat / Plan Data**

**A. Present Use of Land / Structure**

single family residence

**B. Proposed Use of Land / Structure**

single family residence with a 6' tall wooden fence to be located in the secondary front yard area along Newman St., distance approximately 2 feet from the front lot line

**C. Building Data**

Existing :	Floor Area:	N/A	Height in Stories & Feet:	_____
Addition:	Floor Area:	_____	Height in Stories & Feet:	_____
New Bldg:	Floor Area:	_____	Height in Stories & Feet:	_____
Total Floor Area: _____				

**D. Subdivision Data**

Area:	Entire Tract:	N/A	Portion being subdivided:	_____
No. of Lots:	Present	_____	Proposed:	_____
No. of Units:	Demolished:	_____	Proposed:	_____
Purpose: _____				

**E. Non-Residential Use Data**

	Present	Proposed
Total Floor Area of Building:	N/A	_____
Floor Area to be Occupied:	_____	_____
Off-Street Parking:	_____	_____
Number of Employees:	_____	_____
Days & Hours of Operation:	_____	_____
Machinery / Equipment Used:	_____	_____
Description of Operation(s):	_____	_____
	_____	_____
	_____	_____

**5. Request for Bulk Variance**

**A. Bulk Regulations**

	District Requirements	Present	Proposed	Variance
Min. Lot Area	✓ 7,500 SF	6,860 SF	6,860 SF	<input type="checkbox"/>
Min. Lot Width	✓ 62.5 feet	61.72 feet	61.72 feet	<input type="checkbox"/>
Min. Lot Depth (Average)	✓ 100 feet	106 feet	106 feet	<input type="checkbox"/>
Min. Front Yard Setback	✓ 25 feet	25.2 & 20.7 feet	25.2 & 20.7 feet	<input type="checkbox"/>
Min. Side Yard Setback (Left)	✓ 8 feet	7.8 feet	7.8 feet	<input type="checkbox"/>
Min. Side Yard Setback (Right)	✓ N/A			<input type="checkbox"/>
Min. Side Yard Setback (Combined)	✓ N/A			<input type="checkbox"/>
Min. Rear Yard Setback	✓ 25 feet	42 feet	42 feet	<input type="checkbox"/>
Max. Building Coverage	✓ 30%	21%	21%	<input type="checkbox"/>
Max. Impervious Coverage	✓ 50%	38%	38%	<input type="checkbox"/>
Max. Height	✓ 35 feet/3 stories	< 35 feet/3 stories	< 35 feet/3 stories	<input type="checkbox"/>

**B. Describe below the nature of the constraints imposed by the physical characteristics of the property.**

Property is on a corner lot thus creating two (2) front yards. A large existing tree would require removal to meet the 10' setback.

**C. Describe below any other exceptional conditions of the property that prevent the applicant from complying with the Zoning Ordinance.**

A large existing shade tree would require removal in order to meet required 10' setback.

**D. Describe below how not granting this variance request would impose difficulties or undue hardship upon you.**

Applicant has a small toddler and is considering purchasing a dog. The additional height is required for the security of the homeowners as well as the public at large. A solid fence will allow the homeowners to enjoy the same privacy of their backyard that their neighbors do. Adhering to the required setback would require removal of a mature shade tree.

**E. Describe below how the granting of the variance request will not result in substantial detriment to the public good nor substantially impair the intent and purpose of the Zone Plan and the Zoning Ordinance.**

Requested variances will not create any safety issues for the public. Contrarily, the fence will help protect the owner's family and the public. The fence will not interfere with vehicular site lines at the intersection.

**6. Request for Conditional Use Approval / Use Variance**

**A. Describe below the specifics of the request.**

N/A

**B. Describe below the special reasons which exist that support the granting of the request.**

N/A

**C. Describe below how the public interest will be served by the granting of the request.**

N/A

**D. Describe below what circumstances exist or what measures will be taken to ensure that, if the request is granted, the surrounding property owners will experience no adverse impact or undue burden.**

N/A

**E. Describe below how the granting of the request will not result in substantial detriment to the public good nor substantially impair the intent and purpose of the Zone Plan and the Zoning Ordinance.**

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## APPLICATION FOR DEVELOPMENT

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Application Number	Applicant Name	Date Received	Date Deemed Complete
5-19-12	Christina Lopez	5-15-12	5-19-12

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Name N/A Phone \_\_\_\_\_  
Street Address \_\_\_\_\_ Fax \_\_\_\_\_  
City / State \_\_\_\_\_ Zip \_\_\_\_\_ Email \_\_\_\_\_

**C. Architect**

Name N/A Phone \_\_\_\_\_  
Street Address \_\_\_\_\_ Fax \_\_\_\_\_  
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N/A

**E. Describe below how the granting of the request will not result in substantial detriment to the public good nor substantially impair the intent and purpose of the Zone Plan and the Zoning Ordinance.**

N/A

7. **Correspondence**

**A. Person to be contacted in regard to all matters pertaining to this Application (if other than Applicant)**

First Name Tom Phone 732-662-0206  
Last Name Egan Phone \_\_\_\_\_  
Street Address 206 High Street Fax \_\_\_\_\_  
City / State Metuchen, NJ Zip 08840 Email tmegan@gmail.com

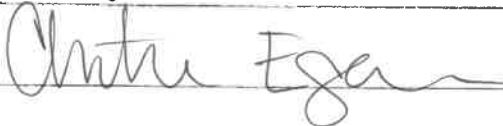
8. **Verification and Authorization**

I, THE UNDERSIGNED, HEREBY MAKE APPLICATION FOR AN APPLICATION FOR DEVELOPMENT ONLY FOR THE LOCATION AND THE WORK DESCRIBED HEREIN AND CERTIFY TO THE ACCURACY OF THAT INFORMATION. I ACKNOWLEDGE THAT IT IS MY RESPONSIBILITY TO BE AWARE OF AND COMPLY WITH ALL ZONING REQUIREMENTS OF THE BOROUGH OF METUCHEN RELATING TO THIS APPLICATION. I UNDERSTAND THAT FAILURE TO PROVIDE ACCURATE INFORMATION OR TO COMPLY WITH ANY PROVISIONS OF THE APPLICATION RENDERS IT NULL AND VOID AND MAY RESULT IN AN ENFORCEMENT ACTION.

CONSTRUCTION OF IMPROVEMENTS WILL NOT BE COMMENCED AT THE ABOVE LOCATION UNTIL THE APPLICANT/OWNER IS IN COMPLIANCE WITH ALL APPLICABLE REGULATIONS REGARDING ZONING AND PROPERTY MAINTENANCE AS DEFINED BY THE CODE OF THE BOROUGH OF METUCHEN. THIS APPLICATION AND ASSOCIATED APPROVALS DO NOT WAIVE ANY OTHER RESTRICTIONS OR REGULATIONS IMPOSED PRIVATELY OR BY LAW.

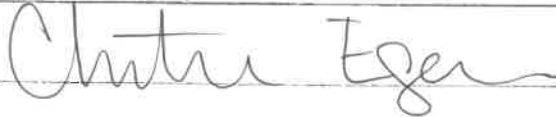
**A. Applicant's Verification**

I HEREBY CERTIFY THE STATEMENTS CONTAINED IN THIS APPLICATION ARE TRUE.

Name Christine Egan Date 4/25/2023  
Signature 

**B. Owner's Authorization**

I HEREBY CERTIFY THAT I AM THE OWNER OF RECORD OF THE PROPERTY DESCRIBED HEREON AND THAT I CONCUR WITH THE DOCUMENTS PRESENTED TO THE PLANNING BOARD / ZONING BOARD OF ADJUSTMENT. I HEREBY AUTHORIZE THE APPLICANT TO SUBMIT THIS APPLICATION FOR DEVELOPMENT.

Name Christine Egan Date 4/25/2023  
Signature   
Telephone & Fax Number: 516-220-5249