

REVISED

DATE OF SUBMISSION: 2/16/23
X ZONING BOARD PLANNING BOARD

RECEIVED BY: Federico
APPLICATION NO. ZB# 2022-08

TOWNSHIP OF FLORENCE
LAND DEVELOPMENT APPLICATION

If you are not familiar with the Florence Township Ordinance requirements please ask to see a member of the Planning/Zoning Staff prior to filling out the application.

A. BASIC INFORMATION

1. APPLICANT NAME: Mohamed Ibrahim Hala Elshorbagy
STREET ADDRESS:
CITY: STATE: ZIP:
TELEPHONE:

2. OWNER NAME: Mohamed Ibrahim Hala Elshorbagy
STREET ADDRESS: 9 W 37th Street
CITY: Bayonne STATE: NJ ZIP: 07002
TELEPHONE: 201-253-5897
551-998-1530

3. If applicant is not owner, set forth in detail the nature and source of the legal beneficial right by which you can claim to submit this application.

4. TYPE OF APPLICATION: (check as many items as applicable)
Starred (*) application require a public hearing with notice and legal advertisement.

- Minor subdivision
- Major Sub-Prel*
- Major Sub-Final
- Minor Site Plan*
- Major Site Plan-Prel.*
- Major Site Plan - Final
- Conditional Use*
- Appeal of decision of an Administrative Officer
- Interpret zoning map or ordinance
- Bulk variances*
- Use variances*
- Informal Review
- Other

NOTE: If a variance is requested in conjunction with this application the exact nature of the variance must be indicated on the application Form - SEE No. 15.

5. LIST OF INDIVIDUALS WHO PREPARED PLANS:

ARCHITECT

NAME: William G. Brown
STREET: 141 Madison Avenue
CITY: Wychew STATE: NJ ZIP: 07481
TELEPHONE: 201-891-3285

SITE PLANNER

NAME:
STREET:
CITY: STATE: ZIP:
TELEPHONE:

ENGINEER

NAME:
STREET:
CITY: STATE: ZIP:
TELEPHONE:
FAX:

ATTORNEY

NAME:
STREET:
CITY: STATE: ZIP:
TELEPHONE:
FAX:

SITE INFORMATION

6. LOCATION OF PROPERTY

STREET ADDRESS: 700 W Front Street
BLOCK NO. 16 LOT NO. 17

7. TYPE OF ROAD FRONTAGE: Rt. 130 Collector Secondary Local Road
 Arterial Primary Local Road

8. ZONE DISTRICTS: (Circle one)

- | | | |
|--|----------------------------|--------------------------|
| R Residential | AGR Agricultural | GM General Manufacturing |
| RA Residential | HC Highway Commercial | SM Special Manufacturing |
| RB Residential | NC Neighborhood Commercial | P Park |
| <input checked="" type="checkbox"/> RC Residential | OP Office Park | H Historic |

9. DESCRIPTION OF PROPOSED USE

Present Use Lot
Proposed Use House
Number of Lots 1

<u>Lot Size</u>	<u>Frontages</u>	<u>Square Feet</u>	<u>Acres</u>
Required	<u>250</u>	<u>217,800</u>	<u> </u>
Existing	<u>48</u>	<u>47,800</u>	<u> </u>
Proposed	<u>48</u>	<u>47,800</u>	<u> </u>

Primary Building Setback Requirements

	<u>Front</u>	<u>One Side</u>	<u>Second Side</u>	<u>Rear</u>
Required	<u>15</u>	<u>5</u>	<u>10</u>	<u>30</u>
Existing	<u>N/A</u>	<u>N/A</u>	<u>N/A</u>	<u>N/A</u>
Proposed	<u>15</u>	<u>5</u>	<u>10</u>	<u>30</u>

Accessory building setback requirements (if applicable)

	<u>Side</u>	<u>Rear</u>	<u>No. of Parking Spaces & Loading</u>	<u>Off Street</u>	<u>Loading</u>
Required	<u> </u>	<u>5</u>	<u> </u>	<u>6.3</u>	<u> </u>
Existing	<u> </u>	<u>N/A</u>	<u> </u>	<u>N/A</u>	<u> </u>
Proposed	<u> </u>	<u>5</u>	<u> </u>	<u>6</u>	<u> </u>

Percent of Impervious Coverage

	<u>Percent of Impervious Coverage</u>	<u>Gross Floor Area</u>	<u>Height</u>
Allowed	<u>4.5%</u>	<u> </u>	<u>35</u>
Existing	<u>N/A</u>	<u>4,133</u>	<u>34.6</u>
Proposed	<u>36.32%</u>	<u> </u>	<u> </u>

10. UTILITIES

Public Water

- | | | | |
|---|---|---|--|
| <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | Will this proposal require new water supply? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Is there an existing well? |
| <input checked="" type="checkbox"/> | Is there an existing municipal water connection? | <input type="checkbox"/> | Can the existing system service this proposal? |
| <input checked="" type="checkbox"/> | Can an existing connection service this proposal? | <input checked="" type="checkbox"/> | Is a new well proposed? |
| <input checked="" type="checkbox"/> | Are additional connections required? | <input checked="" type="checkbox"/> | Has application been made? |
| <input checked="" type="checkbox"/> | Is the municipal water supply available? | <input checked="" type="checkbox"/> | Has application been approved or denied? |
| <input checked="" type="checkbox"/> | Has application been made for municipal sewer conn.? | <input type="checkbox"/> | Date <u> </u> |
| <input type="checkbox"/> | Date <u> </u> No. of Connections <u> </u> | | |

Municipal Sewer

- | | |
|---|--|
| <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | Will the proposal require new sewerage lines? |
| <input checked="" type="checkbox"/> | Is there an existing Municipal sewer connection? |
| <input checked="" type="checkbox"/> | Can the existing connection service the proposal? |
| <input checked="" type="checkbox"/> | Are additional sewer connections required? |
| <input checked="" type="checkbox"/> | Is sewer capacity available? |
| <input checked="" type="checkbox"/> | Has application been made for municipal sewer conn.? |
| <input checked="" type="checkbox"/> | Has application been approved or denied? |

On Site Sewerage Treatment

- | | |
|---|---|
| <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | Is there an existing septic system? |
| <input checked="" type="checkbox"/> | Can the existing system service this proposal? |
| <input checked="" type="checkbox"/> | Is a new system proposed? |
| <input type="checkbox"/> | Type <u> </u> conventional septic |
| <input type="checkbox"/> | <u> </u> alternative sewer |
| <input type="checkbox"/> | <u> </u> waterless covert w/gray water |

Gas Natural Gas Existing
 Proposed

Propane Existing
 Proposed

Electric Existing Above Ground
 Proposed Below Ground

11. OTHER APPROVALS REQUIRED AND DATE PLANS SUBMITTED

	YES	NO	MONTH/DAY/YEAR
1. New Jersey Dept. of Environmental Protection	_____	_____	_____
2. Burlington County Soil Conservation District	_____	_____	_____
3. Burlington County Planning Board	_____	_____	_____
4. N.J. Department of Transportation	_____	_____	_____
5. _____	_____	_____	_____

SUBMISSION DATA

12. LIST OF MAPS, REPORTS AND OTHER MATERIALS ACCOMPANYING APPLICATION
(attach supplemental sheet if necessary)

QUANTITY	DESCRIPTION OF ITEMS	MONTH/DAY/YEAR
1	Survey	_____
1	Zoning Review	_____
1	Foundation Plan	_____
1	First, Second, Third Floor Plans	_____

1. Elevation

13. SUPPLEMENTAL ITEMS (COMPLETE AS NECESSARY)

PREVIOUS APPLICATIONS OR ACTIVITY:

NO YES IF YES _____
MONTH/DAY/YEAR

TYPE OF ACTION _____ APPROVED _____ DISAPPROVED

14. DEED RESTRICTIONS OR COVENANTS AFFECTING THIS APPLICATION: YES (attach copy if yes) NO

15. ARGUMENTS FOR VARIANCE: (attach sheet if necessary)

We intend to develop a family house for our household. This ~~our~~ is our first proposed house.

16. WAIVERS OF DEVELOPMENT STANDARDS AND/OR SUBMISSION REQUIREMENTS: (attach sheet if necessary)

17. EXPERT WITNESSES FOR APPLICANT: (when applicable)

NAME	TYPE OF TESTIMONY
_____	_____
_____	_____
_____	_____

18. AFFIDAVIT OF APPLICANT:

State of New Jersey

County of _____:SS

_____ of full age, being duly sworn according to law, on oath deposes and says, that all of the above statements and the papers submitted herewith are true.

Applicant to Sign Here

Sworn and subscribed before me
this _____ day of _____, 20____.

19. AFFIDAVIT OF OWNERSHIP:

State of New Jersey

County of _____:SS

_____ of full age, being duly sworn according to law, on oath deposes and says, that _____ the deponent resides at _____ in the _____ of _____ in the County of _____ and in the State of _____ that _____ is the owner of all that certain lot, piece of land situated, lying and being in the municipality aforesaid, and known and designated as number _____.

Owner to Sign Here

Sworn and subscribed before me
this _____ day of _____, 20____.

20. AUTHORIZATION BY OWNER: (If anyone other than above owner is making this application, the following authorization must be executed.)

To the Approving Board of the Township of Florence:

_____ is hereby authorized to make the within application.

Dated _____

Owner to Sign Here

CERTIFICATION

Date _____

I, _____, an authorized representative of which is a corporation, or partnership, applying to the Planning Board or Zoning Board of Adjustment of the Township of Florence for permission to subdivide a parcel of land into six (6) or more lots, or applying for a variance to construct a multiple dwelling of twenty-five (25) or more family units, or for the approval of a site to be used for commercial purposes, do hereby disclose, pursuant to the requirements of N.J.S.A.40:55D-48.1. The name and address of all stockholders or individual partners owning at least 10% of the interest in the partnership which are hereby listed as follows:

Name	Address
_____	_____
_____	_____
_____	_____
_____	_____

If any of the above owners is a corporation or partnership, the applicant is required to disclose the name and address of each individual holding a 10% interest, or greater, in the named corporation or partnership which shall be divulged in the same format as the above pursuant to N.J.S.A. 40:55D-48.2)

Title