

**BOARD OF ADJUSTMENT CHECKLIST**

<b><u>PHASE ONE</u></b>	<b><u>APPLICANT</u></b>			<b><u>OFFICE</u></b>
<b>1. Original Escrow Papers/Escrow Fee (\$1,500.00)</b>				
<b>2. 2- Copies Zoning/Building Denial</b>				
<b>3. 2- Copies of Completed Application</b>				
<b>4. 2- Copies of Current Survey/As Built/Survey Affidavit</b> (Show locaton of all HVAC units)				
<b>5. 2- Copies Elevation Plans (front/rear/sides)</b> (floor plans if adding an addition to show FAR/HVAC units)				
<b>6. 2- Copies of any Prior Variance Resoutions</b> (From present & previous ownerships)				
<b>7. 2-Copies of Smoke Rise Approval</b>				
<b>8. 2- Copies of Tax Map</b>				
<b><u>PHASE TWO</u></b>				
<b><u>MUST BE 12 SEPARATE PACKETS</u></b>				
<b>1. Application Fee ( see attached list)</b>				
<b>2. 12- Copies of Approved Application</b>				
<b>3. 12-Copies of Zoning/Building Denial</b>				
<b>4. 12- Copies of Approved Survey/As Built/Affidavit</b> ( Show location of all HVAC units)				
<b>5. 12- Copies of Approved Elevation Plans</b> (floor plans to show FAR if adding an addition/HVAC units)				
<b>6. 12- Copies of Boro Engineer Ltr. Of Completeness</b>				
<b>7. 12- Copies of Resolution from Prior Variances</b> ( From present & previous ownerships)				
<b>8. 12- Copies of Smoke Rise Approval</b>				
<b>9. 12- Copies of Tax Map</b>				
<b>10. 12-Copies of On-Site Inspection Statement</b>				
<b>11. Original Assessors List (\$10.00)</b>				
<b>12. Original Legal Notice</b>				
<b>13. Original Notice to Property Owners</b>				
<b>14. Notarized Legal Notice/Proof of Publication from Trends</b>				
<b>15. Certified Mail Receipts</b>				
<b>16. Affidavit of Service</b>				
<b>17. Tax Collector Approval</b>				

## **INSTRUCTIONS FOR FILING APPLICATIONS**

### **Hardship/Bulk Variance**

The Kinnelon Board of Adjustment holds regular meetings the first ***Tuesday*** of each month at 7:00 p.m. in the Municipal Building meeting room.

### **APPLICATION FEES**

1. **DIMENSIONAL/HARDSHIP** (i.e. variances other than USE VARIANCES).
  - a. \$1,500 (**escrow**-Phase 1 fee)
  - b. \$250.00 per variance/\$500.00 max. (**application fee**-Phase 2 fee)  

**Make check/checks payable to Borough of Kinnelon**
  - c. Up to 10x10 shed-- \$50.00 per variance/\$100.00 max.
  - d. Central Air-Conditioning units—same as 10x10 shed.
2. **"D" VARIANCE** (i.e. Use Variance)
  - a. \$750.00
  - b. \$2500.00 (**escrow**)
3. **ASSESSOR LIST**  
\$10.00
4. **SITE PLAN** SEE Borough Ordinance 47:31.D
5. **SUBDIVISION FEE** See Borough Ordinance 47:31A, 47:31B, 47:31C

**THE FOLLOWING IS A LIST OF PROCEDURES TO BE COMPLETED BY THE APPLICANT IN ORDER TO HAVE YOUR APPLICATION CONSIDERED BY THE BOARD:**

1. If the construction official determines you need a variance, a **building denial** will be issued which will tell the board what setback you are in violation of (front, rear, sides, undersized lot, deficient lot frontage, impervious coverage and floor area ratio). This is determined by presenting to the construction/zoning official a survey of your property showing location of your proposed construction drawn to scale with distance from all property lines.
2. The Secretary for the Board of Adjustment will then give you this packet of instructions. Complete your application, **Form #4** (which consists of 4 pages) completely. *If applicant is other than the owner of the subject property, a notarized consent form is signed by the owner authorizing the applicant to proceed before the board.*

## **ITEMS NEEDED**

- **PHASE ONE**

1. 2-copies Zoning/building Denial
2. 2-copies of completed application
3. 2-copies Current Survey/As Built/ (do not enlarge or reduce, photocopies are not accepted and must contain an original seal and surveyor's signature) architect rendition of a survey on the elevation plans are not accepted). Survey must be no more than 7 years old. The survey must show all accessory structures and all dwelling improvements, the as built must show the location of the well and septic, if applicable. A notarized affidavit statement stating the submitted survey shows the property exactly as the survey SUBMITTED indicates.
4. 2-copies of elevation plans (front, rear, sides of proposed construction depicting how it will be projected from your existing dwelling-for an addition application: floor plans to show living floor space.)
5. 2-copies of prior resolution of variances granted on the property.
6. 2-copies of approval from Architectural Committee if you are a Smoke Rise resident.
7. Escrow fee/escrow papers (no copies needed-only original)
8. 2-copies Tax Map

**Once you have accumulated all of the above, you are ready to submit the application to the board secretary along with your check for the escrow fee.**

Please make 2 separate packets, which will include one (1) of each of the items listed above and on the attached check list. The application process is in 2 (**two phases**). The Secretary will explain the process when the application packet is handed to you when you are ready to apply.

**ALWAYS KEEP A COPY FOR YOURSELF OF ALL PAPERWORK SUBMITTED AS YOU WILL NEED 12 COPIES LATER FOR PHASE 2**

- After you have submitted your **2** application packets to the board secretary, one copy will be forwarded to the Borough Engineer for review for completeness. Once the application is deemed complete by the Borough Engineer, you will receive a letter stating your application is deemed complete and you can then proceed to **Phase 2** of the application process. The secretary to the Board will then guide you through the **Phase 2** process and explain what will need to be submitted as per the checklist. Once the 12 packets are submitted to the secretary, she will give you the paperwork needed to finish the process.

## ITEMS NEEDED

### PHASE 2

1. Application fee
2. 12-copies Zoning/Building Denial
3. 12-copies Approved Application
4. 12-copies Approved Survey/As Built/Signed Affidavit.
5. 12-copies Approved Elevation Plans & floor plans to show living floor space if adding an addition.
6. 12-copies of Borough Engineers review letter deeming application complete.
7. 12-copies of resolutions from prior variance approvals.
8. 12-copies of approval from Architectural Committee if you are a Smoke Rise resident.
9. 12-copies of On-Site Inspection Statement
10. 12-copies of Tax Map

**PLEASE MAKE 12 PACKETS CONTAINING ONE OF EACH OF THE ABOVE PAPERWORK.** These twelve (12) packets must be submitted to the board secretary at least 10 (ten) working days prior to your potential hearing date as the Board secretary needs to send a packet to each board member for review at which time they will visit your property with plans in hand and base their questions to you at the meeting accordingly.

- Applicants are responsible to publish their own **Legal Notice** in the Trends newspaper (BERLEGAL@gannett.com). The Trends publishes on Wednesday and Sunday only. Your legal Notice must be published in the paper at least 10 (**ten**) days prior to the meeting (*do not count day of meeting as part of the 10 days.*)
- Property owners within 200 feet of your property must be notified at least 10 (**ten**) days prior to your scheduled hearing.(do not count meeting day)

Contact **Chris Lauver** the Tax Assessor at 973-838-5402 X 230 to purchase an assessors list of property owners. All owners/business must be notified by using Form #6 (Notice to Property owners) by sending a copy of the form Certified Mail to assure each owner has been notified. The assessors list is **\$10.00**.

### **DEEMING APPLICATION COMPLETE FOR HEARING**

The items listed below **MUST** be submitted to the Secretary of the Board at least **five** (5) days prior to your variance hearing:

1. Original Assessors List
2. Certified Mail Receipts
3. Affidavit of Service
4. Original Notice to Property Owners

5. Original Legal Notice/Notarized Legal Notice from Trends newspaper (Proof of Publication)

**ALL OF THE ABOVE MUST BE TIMELY**, (no exceptions) as the board must comply with New Jersey Municipal Land Use Law, as Sunshine Notices must be published in the local newspaper of all meetings.

**IT IS ABSOLUTELY NECESSARY** that the certified list of names from the Tax Assessor (Assessor list) be returned to the board secretary along with the white certified slips (receipts) from the post office. If notices are hand delivered, homeowners must sign/date the Affidavit of Service.

If you have any questions concerning the procedure for filing an application for a variance, please feel free to call the board secretary, Jennifer Alimurat for help at 973-838-5401 ext. 233.

**INSTRUCTIONS FOR FILING APPLICATIONS**  
**FOR A 10x10 SHED OR CENTRAL AIR-CONDITIONING UNITS**

The Kinnelon Board of Adjustment holds regular meetings the first Tuesday of each month at 7:00 p.m. in the Municipal Building Court Room.

**APPLICATION FEES**

1. **DIMENSIONAL/HARDSHIP** (i.e. variances other than USE VARIANCES).

**Make check/checks payable to Borough of Kinnelon**

- a. Up to a 10x10 shed -- \$50.00 per variance/\$100.00 max.
- b. Central Air-Conditioning units—same as a 10x10 shed.

Guidelines for filling an application:

1. Copy of a Survey or As Built must have the dimensions of the shed or Air-Conditioning on.
2. The setbacks must be on the Survey or As Built.
3. An Affidavit must be submitted stating that it is an accurate representation of the current conditions on the subject property.
4. If the above isn't done the Board Secretary will not accept the application.

Zones	Lot frontage	Side Yard	Rear Yard	Front Yard	Lot Area	Lot Coverage	Bldg. Height	Living Floor Space
R Residential	200 Feet Exception Back Lot 50 feet	25 feet S.R. 50 feet Back Lot 75 feet	50 feet Back Lot 75 feet	50 feet Back Lot 75 feet	60,000 sq. ft. min. Back Lot 3-acre min. 50 ft. to road	<div>Impervious coverage 27% of lot area</div>	<div>2 1/2 stories Average height 35 feet</div>	<div>minimum 1-story-1,400 sq. ft. 2-story- 1,850 sq. ft. maximum 2,000 SQ. FT. + 4.5% of lot area</div>
C Commercial	125 feet minimum for a single commercial establishment	The greater of 50 feet or 20% of lot width	50 feet where it abuts residential property or 25 feet or 10% of depth if other residential	The greater of 50 feet minimum or 20% of lot depth	1/2 acre (for a single business use	N/R	2-stories or 35 feet	N/A
RC Restricted Commercial	N/R	The greater of 50 ft min. or 20% of lot width	50 feet where it abuts residential property or 25 feet or 10% of depth if other residential	The greater of 50 feet minimum or 20% of lot depth	N/R	20% maximum	2-stories or 35 feet	N/A
I Limited Industrial	200 feet	40 feet each, minimum total of 35% of lot width at bldg. line	60 feet	75 feet	lot area minimum 65,000 sq. ft	maximum 30%	2-stories or 35 feet 35 feet	N/A
RR Restricted Recreation	N/R	N/R	N/R	N/R	lot area minimum 200 acres unless otherwise excepted by BOA	N/R	2 1/2 stories or 35 feet	minimum 1-story 1400 sq. ft 2-stories 1850 sq. ft.
AH Affordable Zone		FOR AFFORDABLE HOUSING SEE CHAPTER 207 OF THE BOROUGH ZONING CODE						

N/R NOT REQUIRED

N/A NOT APPLICABLE

REVISED 5/2005

REVISÉD 5/2005



BOROUGH OF  
*Kinnelon*

130 Kinnelon Road  
Kinnelon, New Jersey 07405

BOROUGH CLERK

Phone: 973-838-5401

Extension 1

Fax: 973-838-1862

## NEW ACCOUNT ESCROW INFORMATION SHEET

ESCROW REQUIRED FOR: (CIRCLE ONE) PLANNING BRD BRD OF ADJUSTMENT SOIL REMOVAL

DATE: \_\_\_\_\_

APPLICATION#: \_\_\_\_\_

1. Applicant Name: \_\_\_\_\_

2. Applicant Date of Birth: \_\_\_\_\_

3. Mailing Address: \_\_\_\_\_

\_\_\_\_\_

4. Block: \_\_\_\_\_

5. Lot: \_\_\_\_\_

6. Daytime Phone# \_\_\_\_\_

7. Cell Phone # \_\_\_\_\_

8. Property Address: \_\_\_\_\_

9. Escrow Amount: \_\_\_\_\_

10. E-mail Address: \_\_\_\_\_





BOROUGH OF  
*Kinnelon*

130 Kinnelon Road  
Kinnelon, New Jersey 07405

973-838-5401  
Fax: 838-1862  
[www.kinnelonboro.org](http://www.kinnelonboro.org)

### **RULES AND REGULATIONS FOR ESCROW ACCOUNTS**

1. Copies of all bills will be sent to the applicant from the professionals.
2. All bills will be paid through the escrow account that is set up at the time of the application. All checks will be payable to Borough of Kinnelon.
3. Pursuant to Chapter 47:31M, all escrow accounts are to be kept current. Should they fall to insufficient funds, you will be notified and money shall be received within 10 days or all work will be stopped.

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Applicant's Signature

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Date

**CODE OF THE BOROUGH OF KINNELON, NEW JERSEY, v19 Ordinance 3 / PART  
I ADMINISTRATIVE LEGISLATION / Chapter 47, LAND USE PROCEDURES /  
ARTICLE III, Provisions Applicable to Both Planning Board and Zoning Board of  
Adjustment / § 47-31. Fees. [Amended 10-19-78 by Ord. No. 11-78]**

- (a) All professionals shall submit vouchers to the Chief Financial Officer of the Borough on a monthly basis, in accordance with schedules and procedures established by the Chief Financial Officer of the Borough.
  - (b) If the services are provided by a Borough professional employee, said employee shall prepare and submit a statement containing the same information as required on a voucher on a monthly basis to the Chief Financial Officer of the Borough.
  - (c) The professional shall send an informational copy of all vouchers or statements submitted to the Chief Financial Officer of the Borough simultaneously to the applicant. The Chief Financial Officer of the Borough shall prepare and send to the applicant a statement which shall include an accounting of funds listing all deposits, interest earnings, disbursements and the cumulative balance of the escrow account. If monthly charges are \$1,000 or less, this information shall be provided on a quarterly basis. If monthly charges exceed \$1,000, this information shall be provided on a monthly basis.
  - (d) If an escrow account or deposit contains insufficient funds to enable the Borough or approving authority to perform required application reviews or improvement inspections, the Chief Financial Officer of the Borough shall provide the applicant with a notice of the insufficient escrow or deposit balance. In order for work to continue on the development or the application, the applicant shall within 10 days post a deposit to the account in an amount to be agreed upon by the Borough or approving authority and the applicant. In the interim, any required health and safety inspections shall be made by the Borough and charged back against the replenishment of funds. The Borough shall not make any additional inspections or take any additional action until sufficient funds are deposited.
- (10) Professional charges for review. All professional charges for review of an application for development, review and preparation of documents or inspection of improvements shall be reasonable and necessary, given the status and progress of the application or construction. Review fees shall be charged only in connection with an application for development presently pending before the approving authority or upon review of compliance with conditions of approval or review of requests for modification or amendment made by the applicant.

# Request for Taxpayer Identification Number and Certification

Give form to the requester. Do NOT send to the IRS.

Please print or type

Name (If joint names, list first and circle the name of the person or entity whose number you enter in Part I below. See instructions on page 2 if your name has changed.)

Business name (Sole proprietors see instructions on page 2.)

Please check appropriate box: ☐ Individual/Sole proprietor ☐ Corporation ☐ Partnership ☐ Other

Address (number, street, and apt. or suite no.)

Requester's name and address (optional)

City, state, and ZIP code

List account number(s) here (optional)

## Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. For individuals, this is your social security number (SSN). For sole proprietors, see the instructions on page 2. For other entities, it is your employer identification number (EIN). If you do not have a number, see How To Get a TIN below.

Social security number

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OR

Employer identification number

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Note: If the account is in more than one name, see the chart on page 2 for guidelines on whose number to enter.

## Part II For Payees Exempt From Backup Withholding (See Part II instructions on page 2)

## Part III Certification

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding.

Certification Instructions.—You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because of underreporting interest or dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, the acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally payments other than interest and dividends, you are not required to sign the Certification, but you must provide your correct TIN. (Also see Part III instructions on page 2.)

Sign Here Signature

Date

Section references are to the Internal Revenue Code.

Purpose of Form.—A person who is required to file an information return with the IRS must get your correct TIN to report income paid to you, real estate transactions, mortgage interest you paid, the acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA. Use Form W-9 to give your correct TIN to the requester (the person requesting your TIN) and, when applicable, (1) to certify the TIN you are giving is correct (or you are waiting for a number to be issued), (2) to certify you are not subject to backup withholding, or (3) to claim exemption from backup withholding if you are an exempt payee. Giving your correct TIN and making the appropriate certifications will prevent certain payments from being subject to backup withholding.

Note: If a requester gives you a form other than a W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

What Is Backup Withholding?—Persons making certain payments to you must withhold and pay to the IRS 31% of such

payments under certain conditions. This is called "backup withholding." Payments that could be subject to backup withholding include interest, dividends, broker and barter exchange transactions, rents, royalties, nonemployee pay, and certain payments from fishing boat operators. Real estate transactions are not subject to backup withholding.

If you give the requester your correct TIN, make the proper certifications, and report all your taxable interest and dividends on your tax return, your payments will not be subject to backup withholding. Payments you receive will be subject to backup withholding if:

- You do not furnish your TIN to the requester, or
- The IRS tells the requester that you furnished an incorrect TIN, or
- The IRS tells you that you are subject to backup withholding because you did not report all your interest and dividends on your tax return (for reportable interest and dividends only), or
- You do not certify to the requester that you are not subject to backup withholding under 3 above (for reportable

interest and dividend accounts opened after 1983 only), or

5. You do not certify your TIN. See the Part III instructions for exceptions.

Certain payees and payments are exempt from backup withholding and information reporting. See the Part II instructions and the separate Instructions for the Requester of Form W-9.

How To Get a TIN.—If you do not have a TIN, apply for one immediately. To apply, get Form SS-5, Application for a Social Security Number Card (for individuals), from your local office of the Social Security Administration, or Form SS-4, Application for Employer Identification Number (for businesses and all other entities), from your local IRS office.

If you do not have a TIN, write "Applied For" in the space for the TIN in Part I, sign and date the form, and give it to the requester. Generally, you will then have 60 days to get a TIN and give it to the requester. If the requester does not receive your TIN within 60 days, backup withholding, if applicable, will begin and continue until you furnish your TIN.

**BOARD OF ADJUSTMENT  
OF  
THE BOROUGH OF KINNELON  
APPLICATION FOR DEVELOPMENT**

Applicant hereby applies for:

- |                                      |                                      |  |
|--------------------------------------|--------------------------------------|--|
| <input type="checkbox"/> SUBDIVISION | <input type="checkbox"/> SITE PLAN   | <input type="checkbox"/> Dimensional variance(s)                   |
| <input type="checkbox"/> Minor       | <input type="checkbox"/> Minor       | i.e., setbacks   |
| <input type="checkbox"/> Major       | <input type="checkbox"/> Major       | <input type="checkbox"/> "d" or use variance                       |
| <input type="checkbox"/> Preliminary | <input type="checkbox"/> Preliminary | <input type="checkbox"/> Conditional use                           |
| <input type="checkbox"/> Final       | <input type="checkbox"/> Final       | <input type="checkbox"/> Interpretation                            |
|                                      |                                      | <input type="checkbox"/> Appeal from decision of<br>Zoning Officer |

☐ Other (please specify in detail):

**1. Location of Property in Question:**

Street address: \_\_\_\_\_  
Block: \_\_\_\_\_ Lot(s): \_\_\_\_\_ Zone: \_\_\_\_\_

**2. Applicant:**

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_  
Relationship to Property Owner: \_\_\_\_\_

**3. Property Owner:**

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

**4. Attorney:**

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

*In support of this application:*

5. Describe exactly what you propose to do and what relief you are requesting from this Board. Please refer to the appropriate ordinance numbers which preclude what you propose.

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6. Set forth in detail why the strict enforcement of the provisions of the Zoning Ordinance or the Municipal Land Use Law would result in practical difficulties or unnecessary hardship.

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7. Set forth what exceptional circumstances or conditions exist which affect the property in question which do not affect other properties in the same zone.

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8. Set forth all other matters relevant to this application which you feel this Board should consider in rendering its decision:

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**THE FOLLOWING MUST BE SUBMITTED WITH THIS APPLICATION:**

(a) TWELVE (12) sets of an accurate survey of the property, prepared by a licensed surveyor, indicating all improvements on the lot, with all front, side and rear yard dimensions, together with the front, side and rear yard setback dimensions required by the Zoning Ordinance.

(b) TWELVE (12) sets of a plat plan if new construction is planned, clearly indicating all proposed construction, with all final front, rear and side yard dimensions, together with the front, side and rear yard setback dimensions required by the Zoning Ordinance.

9. Has the Construction Code Official or Zoning Officer examined this application and refused to issue the appropriate permit (s)?
- ( ) No ( ) Yes. If so, attach copy of Building Denial.
10. Has there been any previous various applications concerning this property?
- ( ) No ( ) Yes. If so, please attach a copy of the Resolution of approval or denial.
11. Is the property which is subject of this application presently involved in any court proceedings or an appeal of a previous application?
- ( ) No ( ) Yes. If so, indicate on a separate rider the nature of the court proceedings, the court before which they are pending, and the relief requested.

Site Data:

LOT \_\_\_\_\_  
 BLOCK \_\_\_\_\_  
 ZONE \_\_\_\_\_

Fill in all rows of the chart below. Indicate which items will require a variance by stating yes or no in the variance needed box. Please refer to the bulk requirements chart attached as a reference.

**BULK (DIMENSIONAL) REQUIRMENTS**

<u>Item</u>	<u>Required by Code</u>	<u>Existing</u>	<u>Proposed</u>	<u>Variance needed</u>
Lot area				
Lot frontage				
Front yard setback				
Rear yard setback				
Side yard setback-left				
Side yard setback-right				
Building height				
Number of stories				
Maximum impervious coverage				
Living floor space-Max				
Living floor space-Min 1 Story				
Living floor space-Min 2 Stories				

Dated: \_\_\_\_\_

Applicant \_\_\_\_\_

Consent of Property Owner (if not applicant)

I/we hereby authorize \_\_\_\_\_ to submit this application for development of the Kinnelon borough Zoning Board of Adjustment.

Dated: \_\_\_\_\_

Property Owner: \_\_\_\_\_

## AFFIDAVIT

I \_\_\_\_\_ states that he / she resides at \_\_\_\_\_

IN THE MUNICIPALITY OF Kinnelon, New Jersey, and hereby also states that the  
survey submitted with the Application to the Kinnelon Board of Adjustment,  
attests that it is an accurate representation of the current conditions on the  
subject property.

\_\_\_\_\_  
Property Owner

\_\_\_\_\_  
Notary

\_\_\_\_\_  
Date



# ZONING BOARD OF ADJUSTMENT

BOROUGH OF KINNELON, NEW JERSEY

ON SITE INSPECTION STATEMENT

I, WE \_\_\_\_\_

HAVE APPLIED TO THE KINNELON ZONING BOARD OF ADJUSTMENT FOR:

( ) VARIANCE (S) FROM ZONING REGULATIONS

( ) AN INTERPRETATION OF THE ZONING ORDINANCE

I, WE BY SIGNING THIS STATEMENT AGREE TO AN ON-SITE INSPECTION OF THE  
CAPTIONED PREMISE BY ANY MEMBER OF THE ZONING BOARD OF ADJUSTMENT  
INCLUDING THE BOARD'S PROFESSIONALS PRIOR TO THE REGULAR MEETING OF

\_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Telephone: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**HEARING NOTICE**  
ZONING BOARD OF ADJUSTMENT  
BOROUGH OF KINNELON

**NOTICE TO BE SERVED ON OWNERS OF ALL AFFECTED.**

**PLEASE TAKE NOTE:**

That an application has been made by \_\_\_\_\_ on  
Behalf of \_\_\_\_\_ for a variance from the requirements of the Zoning  
Ordinance Article \_\_\_\_\_ Section \_\_\_\_\_ so as to permit:

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And any other variances and/or waivers that may be required for this application

ON THE PREMISES LOCATED AT \_\_\_\_\_  
Block \_\_\_\_\_ Lot \_\_\_\_\_ Zone \_\_\_\_\_

And this notice is sent to you as an owner of property in the immediate vicinity. A Public Hearing has been ordered for \_\_\_\_\_ at 8:00PM in the Municipal Building, Council Chambers, 130 Kinnelon Road, Kinnelon, New Jersey and when the case is called you may either in person or by agent, or attorney, appear and present any comments which you may have regarding this application.

A copy of this application is on file in the office of the Board of Adjustment of the Municipal Building and is available for inspection weekdays between 8 am to 4pm.

This notice is sent by applicant by order of the Zoning Board of Adjustment of the Borough of Kinnelon, New Jersey.

Respectfully submitted,

\_\_\_\_\_  
Applicant

**TO APPLICANT:** One copy of this notice must be served upon each property owner with-in 200 ft. of the property under appeal. Notice may be served personally upon the owner or his agent in charge of the property or by mailing a copy of this notice to the owner of the property by Certified Mail. Leaving the notice in the mailbox or at the property with-out serving it personally on the owner or his agent is **NOT PROPER SERVICE** and will cause the application to be rejected. The original notice must be filed with the Zoning Board of Adjustment of the Borough of Kinnelon.

**BOROUGH OF KINNELON  
ZONING BOARD OF ADJUSTMENT  
LEGAL NOTICE**

Notice is hereby given that the ZONING BOARD will hold a hearing in Council Chamber,  
130 Kinnelon Road, Kinnelon, New Jersey on

\_\_\_\_\_ Day of Week \_\_\_\_\_ Month \_\_\_\_\_ Date \_\_\_\_\_ Year \_\_\_\_\_

at 8:00 PM on the application of \_\_\_\_\_  
Name of Applicant

of \_\_\_\_\_  
Name of Property Owner

of \_\_\_\_\_ Block \_\_\_\_\_ LOT \_\_\_\_\_  
Street Address

for a Variance from the requirements of the Kinnelon Zoning Ordinance to:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

And any other variances and/or waivers that may be required for this application.

A copy of this application is on file in the Board of Adjustment office of the Municipal Building and is available for inspection weekdays during regular business hours between 8-4 PM.

\_\_\_\_\_  
Applicant

**TO THE APPLICANT:**

This notice must be published in the official newspaper of the Borough of Kinnelon (The Suburban Trends) at least 10 days prior to the hearing date as per Municipal Land Use Law, Chapter 291, and Laws of the State of New Jersey 1975. A copy (notarized) of the published notice must be presented to the Zoning Board Secretary prior to the regular meeting.

## AFFIDAVIT OF SERVICE

Form # 7

On this \_\_\_\_\_ day of \_\_\_\_\_ before me personally came  
\_\_\_\_\_ to me known who being duly sworn, did  
Depose and say that he/she resides at \_\_\_\_\_  
That he has served notice in form as required by the Board of Adjustment of  
the Borough of Kinnelon, New Jersey, of public hearing on appeal to be held  
By said Board on \_\_\_\_\_ at 8:00 pm in the Municipal Building  
Kinnelon, New Jersey and that said notices were served no less than ten (10)  
Days prior to said date of hearing: and that the following persons, comprising  
all the owners of property located within two hundred (200) feet of the extreme  
limits (in every direction) of the property at \_\_\_\_\_ to be  
Affected by said appeal, have been notified as required by the State Law and  
the rules of the said Board of Adjustment.

\_\_\_\_\_  
Applicant or Agent signature

Sworn to and Subscribed to before

Me this \_\_\_\_\_ day of \_\_\_\_\_

\_\_\_\_\_ NOTARY

THIS AFFIDAVIT MUST BE NOTARIZED AND RETURNED TO THE  
ZONING BOARD OF ADJUSTMENT SECRETARY