

9/15/20 - Paul A. (1) App.
& (1) MARKED Bdry. & TOPO.
Joe S. - (1) APP. &
(1) MARKED
Bdry & TOPO

**Township of Washington
Land Development (ZONING) Application
Zoning/Engineering Approval**

Date of Submission: 9/15/20 BLOCK: 4308 LOT: 19

You may visit the Township website at: <http://www.twpofwashington.us> and click on the ORDINANCES link to be connected to the GENERAL CODE E-CODE ONLINE LIBRARY to obtain more information about Zoning Regulations for the Township.

A. OWNER/APPLICANT INFORMATION:

Owner Name: Lorraine Rubino
Owner Address: 397 Fern Street
Twp of Washington Zip 07676
Owner Telephone: 201-851-8082
Applicant Name: Lorraine Rubino

TOWNSHIP OF WASHINGTON
BERGEN COUNTY
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If the applicant is not the property owner, the owner must complete the authorization form on the last page of the application.

Relationship to property owner: _____
Applicant Address: _____
_____ Zip _____
Applicant Telephone: _____

B. TYPE OF APPLICATION: (check all that apply)

Addition _____ Dimensions (L x W x H) _____
Deck _____ Dimensions (L x W) _____
Shed _____ Dimensions (L x W x H) _____
Swimming Pool _____ Whirlpool/Hot tub _____
Fence (privacy) _____ Height _____ Ft.
Fence (for pool barrier) _____ Height _____ Ft. (no more than 6', no less than 4')
Other (please specify) 213 foot retaining wall

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C. SITE INFORMATION: (fill in all blanks)

Tax Block and Lot 4308 Lot 19

Height of existing structure —

Height of Proposed structure 2 or 3 foot

Is this a corner lot? (circle one) YES NO

D. Are there any overhangs on the new structure? YES NO
If yes, please indicate size and draw them on survey.

E. Has there ever been a variance granted on this property before? YES NO
If yes, please explain and attach copy of variance to this application.

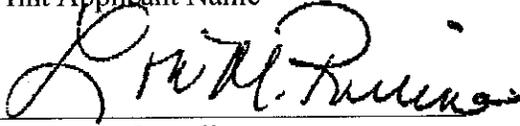
F. Are there any deed restrictions or covenants affecting this application? YES NO
If yes, attach a copy of the Deed

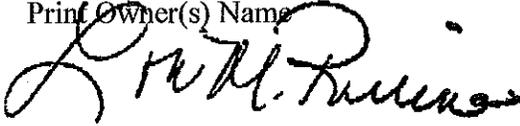
G. Is this property part of a subdivision? YES NO
If yes, attach a copy of the resolution.

H. What percentage range of the existing structure will be demolished?
0% to 15% _____ 16% to 30% _____ 31% to 50% _____
51% to 70% _____ 71% to 90% _____ 91% to 100% _____

Enter the specific numeric percentage of the structure being demolished on this line:
_____ %

I, _____ being of full age, hereby swear that all of the information I have provided
(Print Applicant Name)
in the above application, and the attached survey and/or plans are true and correct to the best of my knowledge.

Lorraine Rubino
Print Applicant Name

Signature of Applicant

Lorraine Rubino
Print Owner(s) Name

Signature of Owner

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LORRAINE RUBINO 55-233/212 181
 403 FERN ST.
 TOWNSHIP OF WASHINGTON, NJ 07676

DATE 9/14/2020

PAY TO THE ORDER OF Twp of Washington \$ 1050⁰⁰/₁₀₀
One thousand fifty 00/₁₀₀ DOLLARS

CHASE
 JPMorgan Chase Bank, N.A.
 www.Chase.com

MEMO 397 Lorraine [Signature] MP

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350 Hudson Avenue
Washington Township, NJ 07676

Phone: 201-666-8797

Township of Washington
County of Bergen

Tax Collector's Office

Memo

To: Zoning Official

From: Tax Collector's Office

Date: 9/15/20

Owner: *Jerraine Rubino*

Address: 397 Fern

Block: 4308

Lot: 19

This is to confirm property taxes referenced above are paid to date.

M. Clancy
Tax Office