CONSTRUCTION, PLANNING & ZONING

601 Main Street Post Office Box A Belmar, NJ 07719

Phone: (732) 681-3700 x225 Fax: (732) 681-3434

Web: www.belmar.com

DEVELOPMENT APPLICATION

DATE RECEIVED:	APPLICATION NO:
RECEIVED BY: (Items above to be filled out by the Borough)	FEE AMOUNT PAID:
(Please Print) Date Prepared: 11/20/19	Zone: RSO
Block(s): <u>191</u>	Lot(s): <u>14</u>
Site Address: 1905 Surf Avenue, Belmar	
	eta errorea en estado en estad A como en estado en
Name of Owner(s): <u>Daniel DeFranco</u>	
Owner Address: 1905 Surf Avenue, Unit 1, Belman Phone #: 732-579-0737	r, NJ: 07719 Email: daniel@groovecompetition.com
Name of Applicant (if different than owner):	
Applicant Address:	en e
Phone #:	Email:
Name of Professional Preparing Plan:	License #:
Name of Firm:	
Firm Address:	
Phone #:	Email:

Name of Attorney Representing Applicant: David A. Krenkel, Esq.

Name of Firm: Krenkel & Krenkel, LLC

Firm Address: 107 Main Street, Allenhurst, NJ 07711

Phone #: 732-531-9300 Email: david.krenkel@krenkellaw.com

1.	Application Request	•		
a.	The applicant is hereby requesting an	application for the following:	•	
	Minor Subdivision	☐ Final Major Site Plan		
	Preliminary Major Subdivision	X Appeal of Zoning Officer's De	ecision ("A")	
	Final Major Subdivision	☐ Interpretation of Zoning Ordin	nance ("B")	
	Conditionally Exempt Site Plan	☐ Hardship or Flexible Bulk Var	riance ("C")	
	Minor Site Plan	☐ Use Variance ("D")		
	Preliminary Major Site Plan			
	Amended Preliminary, Final or Minor	Subdivision		
	Amended Preliminary, Final or Minor	Site Plan		
Is	a variance or conditional use approval Ordinance: the variances needed and attack	and provide		
2.	<u>Items of Proposed Development</u>			-
a.	Address:			
b.	Zoning District:		•	
c.	Number of Existing Lots:	Number of Proposed Lots:		
d.	For the construction of: (check all that apply a	and provide # of each type)		
· 🔲	Single Family Dwelling	☐ Accessory Use	9	
	Two Family Dwelling	☐ Addition		
	Other Residential	☐ Commercial S	tructure(s)	
	Other (Describe)		• • •	
If i	Number of units that will qual nstalling A/C Unit or Generator, provid		sale and	for rent.
	Provide brief description of proposed of	levelopment:	·	

3. Consent for Site Review

a. The applicant and owner realize that as part of the Planning Board / Zoning Board of Adjustment review of its application, that the Board may determine it necessary or advisable to visit the subject premises for the purposes of performing a site inspection and review. The applicant and owner do hereby give permission to any member of the Borough of Belmar's Planning Board and Zoning Board of Adjustment as well as any other Borough employee or

•	offic revie		er the subj	ect premis	es for th	е ршр	ose of	perform	ing a si	te inspe	ection	and
Owner In	> nitials	1 (25/19 Date		Applicant	. Initials		Date			· ·		
. a	. I her plans	reby certi s presente lication is	currence & fy that I an d to the Pla s made with ourchase or	the Ownerning Boar	r of Reco d / Zonin lete unde	ord of the g Board rstandin	ne site of d of Ad	justmen permiss	t. ion in ac	cordanc		
c	Perr App	nission is licant, to	hereby grasubmit the	nted to:	develop	ment p	olans or	,otl	nerwise	known		
Owner In	nitials .	Date	A	Applicant	Initials		Date					

6. Escrow Agreement

- a. The ordinances of the Borough of Belmar require the Applicant to pay certain sums into an escrow account for review of said application for development and for the Owner of said property to agree to the charges against same or become a lien on its property.
- b. The Applicant shall submit an escrow payment to the Borough of Belmar in the amount of to be held by the Borough in an interest bearing account pursuant to N.J.S.A. 40:55D-53.1.
- c. The Borough has the right to withdraw funds from said escrow account for payment of all invoices submitted by the professionals reviewing the application on behalf of the Borough pursuant to N.J.S.A. 40:55D-53.2.
- d. If the escrow account is reduced to 25% of its original amount or if additional payments are deemed necessary by the Planning Board / Zoning Board of Adjustment / Borough, the Applicant shall be notified of such and agrees to make an additional payment within twenty-one (21) days of receipt of request pursuant to Borough Code.

Owner Initials

Date

Applicant Initials

Date

11/20/18

Borough of Belmar Development Application Page 4 of 5

7. Final Certification

<u>Owner</u>

Applicant (if other than owner)

Name:

Daniel DeFranco

Address:

1905 Surf Avenue, Belmar, NJ 07719

Signature:

Notary Public

Attorney on behalf of Applicant/Owner

Name:

David A. Krenkel, Esq. Krenkel & Krenkel, LLC

Address:

107 Main Street, Allenhurst, NJ 07711

Signature:		
Stamp:	Lisa Krintel ESQ,	
Seal:		
• •		

				•		
Compa	ny Name:					Company Name:
Åddress:		,				Address:
						•
					•	
Contact Name:		: :				Contact Name:
Signature:	. *					Signature:
Date Submitted:						Date Submitted:
				·		
					·	
Block:	Lot:				License No.:	
			,	Seal		
Street Address of	Property:	,		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		

Applicant continued
Professional Engineer/Architect

STATEMENT OF CORPORATE OR OTHER OWNERSHIP

Percentage Ownership:

Signature:

Date:

This is to be completed if the property is owned by a corporation or LLC. Please indicate if the applicant is a(an): 1. Corporation b. Partnership If the applicant is a Corporation or a Partnership, the following shall be provided: 2. a. The names and addresses of all stockholders owning 10% or more of its stock of any class; b. The names and addresses of all individual partners who own 10% or greater interest therein. 3. If one or more such stockholders or partners is itself a corporation or partnership, the stockholders holding 10% or more of that corporations stock, or the individual partners owning 10% or greater interest in that partnership, as the case may be, shall also be listed. Name: Name: Address: Address: Percentage Ownership: Percentage Ownership: Signature: Signature: Date: Date: Name: Name: Address: Address:

Percentage Ownership:

Signature:

Date:

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	·	

A

Mayor Mark Walsifer
Council President Thomas Brennan
Councilman James McCracken
Councilwoman Patricia Wann
Councilman Thomas Carvelli
Administrator Edward Kirschenbaum



Borough of Belmar 601 Main Street Belmar, NJ 07719 Phone: 732-681-3700 Fax: 732-681-3434 www.belmar.com

November 6, 2019

VIA REGULAR MAIL & CERTIFIED MAIL (RRR)

Daniel DeFranco 3504 Rose Avenue Unit 1 Ocean, NJ 07712

ke:

1905 Surf Avenue

Block 191 Lot 14

Dear Mr. DeFranco:

Please be advised that I am writing to you as the Zoning Officer of the Borough of Belmar. In that regard, and as a supplement to our prior communications, I would ask that you please note the following:

- 1. As you are aware, there have been a number of complaints associated with the 2 driveways located at the 1905 Surf Avenue, Belmar, NJ property.
- 2. Pursuant to Borough Ordinance No. 40-7.31b, one property is not permitted to have two driveways.
- 3. There is no known documentation on file evidencing that a second driveway at the site was ever previously approved / authorized.
- 4. Respectfully, you are in violation of the prevailing Ordinance.
- 5. Please arrange for the second driveway at the site to be removed.
- 6. I would ask that you please arrange for the second driveway to be removed within 60 days of the issuance of the within letter.
- 7. Respectfully, if the non-compliant second driveway is not removed in accordance with the aforesaid timeframe, I will have no option but to issue additional Notices of Violations and associated fines.

- 8. Please also note that per prevailing provisions of the New Jersey Municipal Land Use Law, any aggrieved individual can appeal the within decision (to the Belmar Zoning Board of Adjustment) within 20 days of issuance of the within. Thus, if you believe the within decision / order / directive has been issued erroneously, please contact the Zoning Board Secretary to as to timely file the appeal paperwork / fees, etc.
- 9. In the alternative, please also note that you have the right to apply to the Zoning Board of Adjustment in the hope of obtaining variance relief to retroactively justify the 2 driveways at the site.
- 10. I would also suggest that you forward the within communication to your attorney, for further review / analysis.

Thank you for your attention.

Very truly yours,

Theodre Brawke

Theodore Bianchi, Zoning Officer

					: :
	•			:	
			·		

SENECA SURVEY COMPANY, INC.

Surveyors and Planners

1470 Route 88 West Brick, NJ 08724



(732) 840-8040 senecaco@comcast.net

INVOICE

TO: DAVID KRENKEL, ESQUIRE

DATE: 7-24-17

PROJECT NO: 17-62506

SURVEY WITH CORNERS SET AND/OR FOUND AND FLAGGED	\$975.00
AND VERIFIED FOR ACCURACY	
ELEVATION CERTIFICATES (2)	\$600.00
TOTAL DUE	\$1,575.00
BELMAR, MONMOUTH COUNTY	
LOT(S) 14, BLOCK 191	
RE: DEFRANCO	
TITI R. TA_137355	•

PLEASE RETURN A COPY OF THIS INVOICE WITH YOUR PAYMENT.

SENECA SURVEY COMPANY, INC.

Surveyors and Planners

1470 Route 88 West Brick, NJ 08724



(732) 840-8040 senecaco@comcast.net

Project No. 17-62506

PROPERTY DESCRIPTION

All that certain lot, tract, or parcel of land and premises, situate, lying and being in the Borough of Belmar, County of Monmouth and State of New Jersey, more particularly described as follows:

Beginning at a point in the northwesterly line of Surf Avenue, (50 feet wide), said point being distant 100.00 feet northeastwardly from the intersection of the northeasterly line of Twentieth Avenue, (60 feet wide), with said northwesterly line of Surf Avenue and from said Beginning Point running, thence

- 1. North 59 degrees 00 minutes 00 seconds West, 100.00 feet to a rebar set; thence
- 2. North 31 degrees 00 minutes 00 seconds East, 50.00 feet to a point; thence
- 3. South 59 degrees 00 minutes 00 seconds East, 100.00 feet to a rebar found in the northwesterly line of Surf Avenue; thence
- 4. Along same, South 31 degrees 00 minutes 00 seconds West, 50.00 feet to a point in said northwesterly line of Surf Avenue, said point being the Point and Place of Beginning.

Being known and designated as All of Lots 6 and 7 and Part of Lot 8 in Block 16 as shown on a certain map entitled, "Map Of Belmar Park Tract, Monmouth Co., N.J.," and filed in the Monmouth County Clerk's Office on August 3, 1908 in Case number 27, Sheet 2.

Also being known and designated as Lot(s) 14 in Block 191 as shown on the official Tax Maps of the Borough of Belmar, Monmouth County, New Jersey.

The above description was drawn in accordance with a survey prepared by Seneca Survey Company, Inc., Robert W. Smith, Jr., P.L.S., dated July 24, 2017.

SENECA SURVEY COMPANY, INC.

Surveyors and Planners

1470 Route 88 West Brick, NJ 08724



(732) 840-8040 senecaco@comcast.net

In compliance with N.J.S.A. 45:8-36.3 & N.J.A.C.13:40-5.1(d) & 5.2 WAIVER AND DIRECTION NOT TO SET CORNER MARKERS

To: "Surveyor" SENECA SURVEY COMPANY 1470 Route 88 West Brick, New Jersey 08724 (732)840-8040 Fax (732) 840-8044

From: "Ultimate User" Name: DeFranco Address: 1905 SURF AVE

BELMAR BOROUGH

Re: BLOCK 191, LOT 14; BELMAR BOROUGH Re: Seneca File # 17-62506

Property (Lot and Block number, Municipality or other identifier)

If this form is not signed and returned prior to completion of survey, we are subject to a \$2,500.00 fine per property surveyed. Therefore, if the waiver form is not received; corner markers will be set and charged accordingly.

This is to advise that I have been made aware of my right to have comer markers set as part of a survey to be performed on the aforementioned property. In addition, I have been made aware of the potential impact of signing the waiver including: (1) the possible need for a future survey as a result of physical improvements to the property, such as a fence, addition, deck, pool or shed, and (2) the potential inability of the ultimate user to identify the *[actual] boundary of the property which could result in a boundary dispute with an adjoining property owner and/or property improvements not accurately situated on my property. The right to have comer markers set is hereby waived, and you are directed to perform the land survey without the setting of comer markers as provided by the regulation (N.J.A.C. 13:40-5.2) of the State Board of Professional Engineers and Land Surveyors. I/We hereby understand that I/We will be responsible for the payment of said survey regardless

of whether or not this matter closes.	· · · · · · · · · · · · · · · · · · ·
Ultimate User's Signature	
Date:	
Witness' Signature	
Date:	
Name of Witness (Typed or Printed)	
Address of Witness (Typed or Printed)	
,	
For Surveyor Office Use	Only A See Paggint of United 1 Hyry : 1

I hereby certify that I have:

1: Advised the Ultimate user of the impact of signing the comer marker waiver, which shall include, but not be limited to, the possible need for a future survey as a result of physical improvements to the property and the potential inability of the ultimate user to identify the boundary of the property; 2. Reviewed the waiver to ensure that it was properly signed by the ultimate user and witnessed by a person other than a Land Surveyor; and

3. Performed a physical measurement of the property.

In order that your Survey is not delayed. PLEASE HAVE WAIVER SIGNED AND RETURNED AS SOON AS POSSIBLE

U.S. DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency National Flood Insurance Program

OMB No. 1660-0008 Expiration Date: November 30, 2018

Important: Follow the instructions on pages 1-9.

Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner. SECTION A - PROPERTY INFORMATION FOR INSURANCE COMPANY USE A1. Building Owner's Name

DANIEL C. DeF					ĺ	Policy Nu	mber:
A2. Building Stre Box No. 1905 SURF AVE		ncluding Apt., Unit, Su T BUILDING)	ite, and	d/or Bldg. No.) or P.	O. Route and	Company	NAIC Number:
City BELAMR	٠.			State New Jersey		ZIP Code 07719-26	47
A3. Property Des IOT 14, BLOCK 1	scription (Lot a 91, BOROUG	and Block Numbers, T BH OF BELMAR	ax Par	ce! Number, Legal [Description, etc.)	·.	
A4. Building Use	(e.g., Reside	ntial, Non-Residential,	Additio	on, Accessory, etc.)	RESIDENTIAL (F	RONT BU	II DING)
A5. Latitude/Long	gitude: Lat.	40.1693		-74.0180	Horizontal Datum:		
A6. Attach at lea	st 2 photograp	ohs of the building if th	e Certi	ficate is being used	to obtain flood incurre	יייייייייייייייייייייייייייייייייייייי	1927 X NAD 1983
A7. Building Diag	ram Number	2A			to obtain hood misdran	ice,	
A8. For a building	with a crawls	pace or enclos⊧ire(s):		•			•
		lspace or enclosure(s)		850 sq ft	•		
b) Number o	permanent fl	ood openings in the cr	awlspa		within 1.0 foot shows		
c) Total net a	rea of flood o		0	sq in	widtar 1.0 juul above s	iajacent g	rade 0
d) Engineere			io				
			10				
A9. For a building		•		• •	•		
a) Square for		"		sq ft	•	•	
b), Number of	permanent fic	ood openings in the at	tached	garage within 1.0 fo	oot above adjacent gra	ide	
c) Total net a	ea of flood op	enings in A9.b		_ sq in			
d) Engineered	fiood openin	gs? 🗌 Yes 🔲 N	lo	•	•		
	SE	CTION B - FLOOD II	delib	NOE DATE HAD			
B1. NFIP Commun	ity Name & C	ommunity Number	10010	B2. County Name		ON	
BELMAR, BOROU	GH OF - 3452	283		MONMOUTH	•	*.	B3. State New Jersey
34. Map/Panel Number 34025C0342	B5. Suffix	B6. FIRM Index Date 09/25/2009	R	IRM Panel ffective/ evised Date i/2009	B8. Flood Zone(s)	1 (20)	le Flood Elevation(s) ne AO, use Base nd Depth)
B10. Indicate the s	ource of the F	Base Flood Elevation (I	BFE) d ined [ata or base flood de	epth entered in Item B): 	
		ed for BFE in Item B9		- 		/Source:	
312. Is the building	located in a	Coastal Barrier Resou	rces Sy	stem (CBRS) area	or Otherwise Protecte	d Area (∩	PA\2 [] V [] ··
Designation D	ate:			□ ОРА	- mor moo i Totacia	~ ∧iea (U	TOUT LES XINO
MA Form 006 0 22	/7714 F1						

OMB No. 1660-0008 **ELEVATION CERTIFICATE** Expiration Date: November 30, 2018 IMPORTANT: In these spaces, copy the corresponding information from Section A FOR INSURANCE COMPANY USE Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. Policy Number: 1905 SURF AVENUE (FRONT BUILDING) State ZIP Code Company NAIC Number BELAMR New Jersey 07719-2647 SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED) ☐ Construction Drawings* ☐ Building Under Construction* X Finished Construction C1. Building elevations are based on: *A new Elevation Certificate will be required when construction of the building is complete. C2. Elevations - Zones A1-A30, AE, AH, A (with BFE), VE, V1-V30, V (with BFE), AR, AR/A, AR/AE, AR/A1-A30, AR/AH, AR/AO. Complete Items C2.a-h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters. Benchmark Utilized: GPS Vertical Datum: NAVD 88 Indicate elevation datum used for the elevations in items a) through h) below. ☐ NGVD 1929 🖾 NAVD 1988 ☐ Other/Source: Datum used for building elevations must be the same as that used for the BFE. Check the measurement used. a) Top of bottom floor (including basement, crawlspace, or enclosure floor) 47 X feet ☐ meters 11 7 x feet b) Top of the next higher floor ☐ meters N/A c) Bottom of the lowest horizontal structural member (V Zones only) x feet . meters N/A d) Attached garage (top of slab) X feet meters 5.0 e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments) x feet meters 6,7 Lowest adjacent (finished) grade next to building (LAG) X feet meters 7 4 g) Highest adjacent (finished) grade next to building (HAG) X feet nieters 6.7 Lowest adjacent grade at lowest elevation of deck or stairs, including X feet meters structural support SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law to certify elevation information. I certify that the information on this Certificate represents my best efforts to interpret the data available. I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001. Check here if attachments. Certifier's Name License Number ROBERT W. SMITH, JR. NJ PLS #23934 PROFESSIONAL LAND SURVEYOR Company Name SENECA SURVEY COMPANY (PROJECT#17-62506 - FRONT BLDG) Address **1470 ROUTE 88 WEST** City State ZIP Code BRICK New Jersey 08724 Date Telephone Signature 07/24/2017 (732) 840-8040 Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner. Comments (including type of equipment and location, per C2(e), if applicable) C2a IS A BASEMENT, C2b TAKEN AT DOOR JAM. C2e WATER HEATER IN BASEMENT, FURNANCE IN BASEMENT EL=5.8'. PROPERTY IS WITHIN THE PRELIMINARY FLOOD ZONE AE 10, PER FEMA PRELIMINARY FLOOD MAP NO. 34025C0342G, PUBLISHED 01/31/2014, THIS IS FOR INFORMATIONAL PURPOSES ONLY AND IS SUBJECT TO VERIFICATION BY FEMA AND LOCAL ZONING AND BUILDING REGULATIONS. THIS CERTIFICATE IS CERTIFIED TO THE OWNER ON LINE A1 ONLY AND IS NON-TRANSFERRABLE.

OMB No. 1660-0008 Expiration Date: November 30, 2018

IMPORTANT: In these spaces, copy th	e corresponding informatio	n from Section A.	FOR INSURANCE COMPANY USE
Building Street Address (including Apt., 1905 SURF AVENUE (FRONT BUILD)	Unit, Suite, and/or Bldg. No.) c NG)	or P.O. Route and Box No.	Policy Number:
City	State	ZIP Code	Company NAIC Number
BELAMR	New Jersey	07719-2647	Company IAAIC Number
SECTION E - I	BUILDING ELEVATION INF FOR ZONE AO AND ZO	ORMATION (SURVEY NOT NE A (WITHOUT BFE)	required)
For Zones AO and A (without BFE), com- complete Sections A, B, and C. For Items enter meters.	plete Items E1-E5. If the Cert	tificate is intended to support	a LOMA or LOMR-F request, ement used. In Puerto Rico only,
E1. Provide elevation information for the the highest adjacent grade (HAG) a a) Top of bottom floor (including ba	nd the lowest adjacent grade (opriate boxes to show whethe (LAG).	er the elevation is above or below
crawlspace, or enclosure) is b) Top of bottom floor (including ba	<u> </u>	[feet] mete	rs above or below the HAG.
crawlspace, or enclosure) is		feet mete	rs 🔲 above or 🔲 below the LAG.
E2. For Building Diagrams 6-9 with pen the next higher floor (elevation C2.b	manent flood openings provide	ed in Section A Items 8 and/o	r 9 (see pages 1-2 of Instructions),
the diagrams) of the building is			rs above or below the HAG.
E3. Attached garage (top of slab) is			rs above or below the HAG.
E4. Top of platform of machinery and/or servicing the building is	equipment ————· –		is above or below the HAG.
E5. Zone AO only: If no flood depth num floodplain management ordinance?	ober is available, is the top of the Yes No Unkn	he bottom floor elevated in ac nown. The local official must	cordance with the community's certify this information in Section G.
SECTION F - PR	OPERTY OWNER (OR OWNE	EDIC DEDDECENTATIVES O	POTICIO I TOU
The property owner or owner's authorize	a representative who complete	es Sections A. B. and E.for Zo	nne A (without a FEMA_issued or
community-issued BFE) or Zone AO mus	st sign here. The statements in	Sections A. B. and E are con	rect to the best of my knowledge
Community-Issued Bir (1) of Zorie AO files	scaign nate. The statements in	1 Sections A, B, and E are co	rrect to the best of my knowledge.
Property Owner or Owner's Authorized F	scaign nate. The statements in	n Sections A, B, and E are co	rrect to the best of my knowledge.
Community-Issued Bir (1) of Zorie AO files	t sign here. The statements in	1 Sections A, B, and E are col	rect to the best of my knowledge.
Property Owner or Owner's Authorized R	tepresentative's Name	City Si	rrect to the best of my knowledge.
Property Owner or Owner's Authorized F	tepresentative's Name	City Si	rect to the best of my knowledge. ZIP Code
Property Owner or Owner's Authorized F Address Signature	tepresentative's Name	City Si	rect to the best of my knowledge. ZIP Code
Property Owner or Owner's Authorized F Address Signature	tepresentative's Name	City Si	rect to the best of my knowledge. ZIP Code
Property Owner or Owner's Authorized F Address Signature	tepresentative's Name	City Si	rect to the best of my knowledge. ZIP Code
Property Owner or Owner's Authorized F Address Signature	tepresentative's Name	City Si	rect to the best of my knowledge. ZIP Code
Property Owner or Owner's Authorized F Address Signature	tepresentative's Name	City Si	rect to the best of my knowledge. ZIP Code
Property Owner or Owner's Authorized F Address Signature	tepresentative's Name	City Si	rect to the best of my knowledge. ZIP Code
Property Owner or Owner's Authorized F Address Signature	tepresentative's Name	City Si	rect to the best of my knowledge. ZIP Code
Property Owner or Owner's Authorized F Address Signature	tepresentative's Name	City Si	rect to the best of my knowledge. ZIP Code
Property Owner or Owner's Authorized F Address Signature	tepresentative's Name	City Si	rect to the best of my knowledge. ZIP Code
Property Owner or Owner's Authorized F Address Signature	tepresentative's Name	City Si	rect to the best of my knowledge. ZIP Code

OMB No. 1660-0008 Expiration Date: November 30, 2018

IMPORTANT: in these spaces, copy the co	orresponding information from Section A.	FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit 1905 SURF AVENUE (FRONT BUILDING)	, Suite, and/or Bldg. No.) or P.O. Route and Box)	No. Policy Number:
City BELAMR	State ZIP Code New Jersey 07719-2647	Company NAIC Number
SEC	TION G - COMMUNITY INFORMATION (OPTI	ONAL)
	r ordinance to administer the community's flood tion Certificate. Complete the applicable item(s) enter meters.	
G1. The information in Section C was engineer, or architect who is authorized ata in the Comments area below	taken from other documentation that has been sorized by law to certify elevation information. (Inc.)	signed and sealed by a licensed surveyor, dicate the source and date of the elevation
G2. A community official completed Some AO.	ection E for a building located in Zone A (withou	t a FEMA-issued or community-issued BFE)
G3. The following information (Items (G4–G10) is provided for community floodplain m	anagement purposes.
G4. Permit Number	G5. Date Permit Issued	G6. Date Certificate of Compliance/Occupancy Issued
G7. This permit has been issued for:	☐ New Construction ☐ Substantial Improver	nent
G8. Elevation of as-built lowest floor (inclu- of the building:	ding basement)	feet meters Datum
G9. BFE or (in Zone AO) depth of flooding	at the building site:	☐ feet ☐ meters Datum
G10. Community's design flood elevation:		feet meters Datum
Local Official's Name	Title	
Community Name	Telephone	
Signature	Date	
Comments (including type of equipment and	I location, per C2(e), if applicable)	
		·
	•	•
		Check here if attachments.

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

See Instructions for Item A6.

OMB No. 1660-0008 Expiration Date: November 30, 2018

MPORTANT: In these spaces, copy the corresponding information from Section A.					FOR INSURANCE COMPANY USE Policy Number:	
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 1905 SURF AVENUE (FRONT BUILDING)						
City		- 24	State	ZIP Code	Company NAIC Number	
BELAMR			New Jersey	07719-2647		

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least 2 building photographs below according to the instructions for Item A6, Identify all photographs with date taken; "Front View" and "Rear View", and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8. If submitting more photographs than will fit on this page, use the Continuation Page.



Photo One Caption FRONT

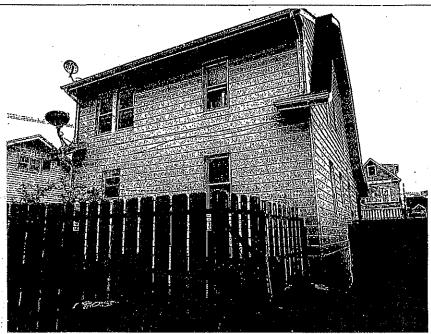


Photo Two

Photo Two Caption REAR

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

Continuation Page

OMB No. 1660-0008 Expiration Date: November 30, 2018

IMPORTANT: In these spaces, copy the	FOR INSURANCE COMPANY USE Policy Number:		
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 1905 SURF AVENUE (FRONT BUILDING)			
City BELAMR	State New Jersev	ZIP Code 07719-2647	Company NAIC Number

If submitting more photographs than will fit on the preceding page, affix the additional photographs below. Identify all photographs with: date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8.

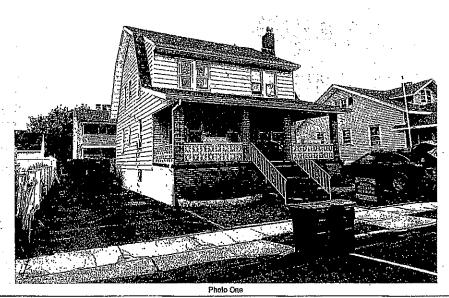


Photo One Caption LEFT



Photo Two Caption RIGHT

U.S. DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency National Flood Insurance Program

OMB No. 1660-0008 Expiration Date: November 30, 2018

ELEVATION CERTIFICATE

Important: Follow the instructions on pages 1-9. Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner. SECTION A - PROPERTY INFORMATION FOR INSURANCE COMPANY USE A1. Building Owner's Name DANIEL C. DeFRANCO Policy Number: A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Company NAIC Number: 1905 SURF AVENUE (REAR BUILDING) State ZIP Code **BELAMR New Jersey** 07719-2647 A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) IOT 14, BLOCK 191, BOROUGH OF BELMAR A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL (REAR BUILDING) A5. Latitude/Longitude: Lat. 40.1693 Long. -74.0182 Horizontal Datum: NAD 1927 X NAD 1983 A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance. A7. Building Diagram Number A8. For a building with a crawlspace or enclosure(s): a) Square footage of crawlspace or enclosure(s) 625 b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade c) Total net area of flood openings in A8.b 0 A9. For a building with an attached garage: a) Square footage of attached garage sq ft b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade c) Total net area of flood openings in A9.b SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION B1, NFIP Community Name & Community Number **B2.** County Name BELMAR, BOROUGH OF - 345283 B3. State. MONMOUTH New Jersey B4. Map/Panel -B5. Suffix: 86. FIRM Index **B7. FIRM Panel** B8. Flood Zone(s) Number B9. Base Flood Elevation(s) Date Effective/ (Zone AO, use Base Flood Depth) Revised Date 34025C0342 09/25/2009 09/25/2009 Х N.B.F. B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item 89. ☐ FIS Profile ☑ FIRM ☐ Community Determined ☐ Other/Source: B11. Indicate elevation datum used for BFE in Item B9: NGVD 1929 X NAVD 1988 C Other/Source: B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? [] Yes 🔀 No Designation Date: ☐ CBRS ☐ OPA

OMB No. 1660-0008 Expiration Date: November 30, 2018

IMPORTANT: In these spaces, copy the corre	sponding information from	- C41 4	Expiration Date: November 30, 2018
IMPORTANT: In these spaces, copy the corresponding information from Section A. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 1905 SURE AVENUE. (PEAR BUILDING)			FOR INSURANCE COMPANY USE
1905 SURF AVENUE (REAR BUILDING)			Policy Number:
BELAMR	State New Jersey	ZIP Code 07719-2647	Company NAIC Number
SECTION C - BUIL	DING ELEVATION INFOR	MATION (SURVEY E	PEOURED)
C1. Building elevations are based on:	onstruction Drawings*	Building Lindor Const	
*A new Elevation Certificate will be require	d when construction of the b	building is complete.	
C2. Elevations – Zones A1–A30, AE, AH, A (w Complete items C2.a–h below according t Benchmark Utilized: GPS	and mind about	acom Rem At. III Fuel	R/AE, AR/A1-A30, AR/AH, AR/AO. to Rico only, enter meters.
Indicate elevation datum used for the eleva-	Vertical Da	turn: NAVD 88	
NGVD 1929 ⊠ NAVD 1988	Other/Source:	•	
Datum used for building elevations must be			Chook the many
a) Top of bottom floor (including basemen	t, crawispace, or enclosure f	loor) 7,4	Check the measurement used.
b) Top of the next higher floor	, , ,	15 4	feet meters
 c) Bottom of the lowest horizontal structure 	i member A/ Zones only)	N/A	X feet meters
d) Attached garage (top of slab)	Thombol (V Zones only)	N/A	X feet meters
e) Lowest elevation of machinery or equip (Describe type of equipment and location	ment servicing the building	N/A	⊠ feet ☐ meters
f) Lowest adjacent (finished) grade next to	hullding (LAC)		
		<u>6</u> 8	X feet
g) Highest adjacent (finished) grade next to	Discussion (HAG)	7.1	X feet
h) Lowest adjacent grade at lowest elevation structural support	•		🔀 feet 🗌 meters
SECTION D - SUR	VEYOR, ENGINEER, OR A	RCHITECT CERTIFI	CATION
This certification is to be signed and sealed by a I certify that the information on this Certificate re- statement may be punishable by tine or imprisor. Were latitude and longitude in Seation A.			The state of the s
	d by a licensed land surveyo	or? 🗵 Yes 🗌 No	Check here if attachments.
Certifier's Name ROBERT W. SMITH, JR.	License Number NJ PLS #23934		
Title PROFESSIONAL LAND SURVEYOR			
Company Name			Place of ()
SENECA SURVEY COMPANY (PROJECT#17-6 Address	2506 - REAR BLDG)		Sepi ()
1470 ROUTE 88 WEST	· · ·		No.
City BRICK	State New Jersey	ZIP Code 08724	1/2/00
Signature	Date 07/24/2017	Telephone (732) 840-8040	
Copy all pages of this Elevation Certificate and all a	tachments for (1) community	official (2) incomes	9
Comments (including type of equipment and locat C2b IS SLAB CONSTRUCTION, C2e UTILITIES I ZONE AE 10, PER FEMA PRELIMINARY FLOOD PURPOSES ONLY AND IS SUBJECT TO VERIFI CERTIFICATE IS CERTIFIED TO THE OWNERS	ion, per C2(e), if applicable) UNKNOWN, NO ACCESS, F MAP NO. 34025C0342G, F	PROPERTY IS WITHIN PUBLISHED 01/31/201	THE PRELIMINARY FLOOD 4, THIS IS FOR INFORMATIONAL

Top of bottom floor (including basement,

crawlspace, or enclosure) is

OMB No. 1660-0008 Expiration Date: November 30, 2018

feet meters above or below the LAG.

IMPORTANT: In these spaces, copy the corresponding information from Section A. FOR INSURANCE COMPANY USE Building Street Address (including Apt., Unit, Suite, and/or Bldg: No.) or P.O. Route and Box No. Policy Number. 1905 SURF AVENUE (REAR BUILDING) City State ZIP Code Company NAIC Number **BELAMR** New Jersey 07719-2647 SECTION E – BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE) For Zones AO and A (without BFE), complete Items E1–E5. If the Certificate is intended to support a LOMA or LOMR-F request, complete Sections A, B, and C. For items E1–E4, use natural grade, if available. Check the measurement used. In Puerto Rico only, E1. Provide elevation information for the following and check the appropriate boxes to show whether the elevation is above or below the highest adjacent grade (HAG) and the lowest adjacent grade (LAG). a) Top of bottom floor (including basement, crawlspace, or enclosure) is ☐ feet ☐ meters ☐ above or ☐ below the HAG.

E2. For Building Diagrams 6–9 with permanent flood openings putthe next higher floor (elevation C2.b in	rovided in Section	n A Items 8 and/or 9	(see pages 1-2 of Instructions),
the diagrams) of the building is		feet meters	above or below the HAG.
E3. Attached garage (top of slab) is	**.	☐ feet ☐ meters	above or below the HAG.
E4. Top of platform of machinery and/or equipment servicing the building is		☐feet ☐meters	above or below the HAG.
E5. Zone AO only: If no flood depth number is available, is the to floodplain management ordinance? Yes No	p of the bottom fl Unknown. The l	oor elevated in accor local official must cer	dance with the community's tify this information in Section G.
SECTION F - PROPERTY OWNER (OR	OWNER'S REPR	ESENTATIVE) CER	TIFICATION
The property owner or owner's authorized representative who cor community-issued BFE) or Zone AO must sign here. The statement	npletes Sections ents in Sections A	A, B, and E for Zone	A (without a FEMA-issued or to the best of my knowledge.
Property Owner or Owner's Authorized Representative's Name			
Address	City .	State	ZIP Code
	•		
Signature	Date	Telen	hone

FEMA Form 086-0-33 (7/15)

Comments

Check here if attachments.

OMB No. 1660-0008 Expiration Date: November 30, 2018

		****	FOR INSURANCE	COMPANY USE
t, Suite, and/or Bldg. No.)	or P.O. Route and	Box No.	Policy Number:	
State	ZIP Code		Company NAIC Nu	mber
New Jersey	07719-26	47		
TION G - COMMUNITY	INFORMATION (O	PTIONAL)		
or ordinance to administer ition Certificate. Complete , enter meters.	the community's flo the applicable item	oodplain ma n(s) and sigr	nagement ordinance n below. Check the m	can complete easurement
taken from other docume orized by law to certify elev.)	ntation that has be evation information.	en signed a (Indicate th	nd sealed by a licens e source and date of	ed surveyor, the elevation
Section E for a building loc	ated in Zone A (wit	hout a FEM	A-issued or communi	ty-issued BFE)
G4–G10) is provided for c	ommunity ficodplai	n managem	ent purposes.	•
G5. Date Permit Iss	ued	G6. I	Date Certificate of	nu formed
			ompilance/occupan	cy issued
C Now Construction C	1 Cubatastial Imag			
	T ganátauriai imbid	ovement		•
ding basement)	<u>.</u> .	. []:feet	meters Datum	· .
at the building site:	• • • • • • • • • • • • • • • • • • • •	feet	meters Datum	,
	*	☐ feet	meters	
	Title			,
	Telephone			· .
	Date			<u>.</u>
d location, per C2(e), if ap	plicable)			
	,			
	•	•		
			•	
	•			
		• •		
				3 8
		•		·
			Check here	if attachments.
	State New Jersey CTION G - COMMUNITY or ordinance to administer tion Certificate. Complete , enter meters. taken from other docume orized by law to certify ele () ection E for a building loc G4-G10) is provided for c G5. Date Permit Iss New Construction [ding basement) at the building site:	State ZIP Code New Jersey 07719-26. STION G - COMMUNITY INFORMATION (Or ordinance to administer the community's flation Certificate. Complete the applicable item, enter meters. Itaken from other documentation that has be orized by law to certify elevation information. Section E for a building located in Zone A (with G4-G10) is provided for community floodplait. G5. Date Permit Issued. New Construction Substantial Improding basement) at the building site: Title Telephone	New Jersey 07719-2647 CTION G – COMMUNITY INFORMATION (OPTIONAL) or ordinance to administer the community's floodplain mation Certificate. Complete the applicable item(s) and sign, enter meters. Itaken from other documentation that has been signed a orized by law to certify elevation information. (Indicate the community floodplain in the community floodplain managem) G4-G10) is provided for community floodplain managem G5. Date Permit Issued G6. If the community floodplain in the community floodplain managem is feet. Title Telephone Date	t, Suite, and/or Bldg. No.) or P.O. Route and Box No. State ZIP Code New Jersey 07719-2647 Company NAIC Nu STION G – COMMUNITY INFORMATION (OPTIONAL) or ordinance to administer the community's floodplain management ordinance tion Certificate. Complete the applicable item(s) and sign below. Check the meters. taken from other documentation that has been signed and sealed by a licens orized by law to certify elevation information. (Indicate the source and date of A) ection E for a building located in Zone A (without a FEMA-issued or community floodplain management purposes. G5. Date Permit Issued G6. Date Certificate of Compliance/Occupan New Construction Substantial Improvement ding basement) feet meters Datum Title feet meters Datum Title Telephone Date I location, per C2(e), if applicable)

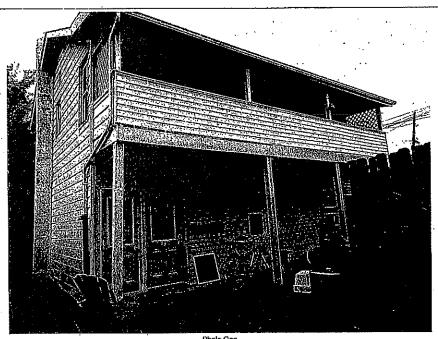
BUILDING PHOTOGRAPHS See Instructions for Item A6.

OMB No. 1660-0008 Expiration Date: November 30, 2018

ELEVATION CERTIFICATE

IMPORTANT: In the	FOR INSURANCE COMPANY USE			
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 1905 SURF AVENUE (REAR BUILDING)				Policy Number:
City		State	ZIP Code	Company NAIC Number
BELAMR		New Jersey	07719-2647	<u>, , , , , , , , , , , , , , , , , , , </u>

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least 2 building photographs below according to the instructions for Item A6. Identify all photographs with date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8. If submitting more photographs than will fit on this page, use the Continuation Page.



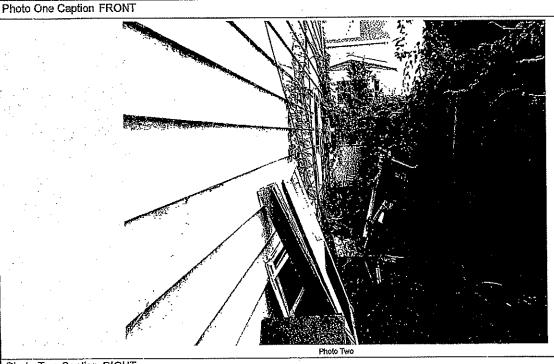


Photo Two Caption RIGHT

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

Continuation Page

OMB No. 1660-0008 Expiration Date: November 30, 2018

IMPORTANT: In these spaces, c	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 1905 SURF AVENUE (REAR BUILDING)			Policy Number:
City	State	ZIP Code	Company NAIC Number
BELAMR	New Jersey	07719-2647	

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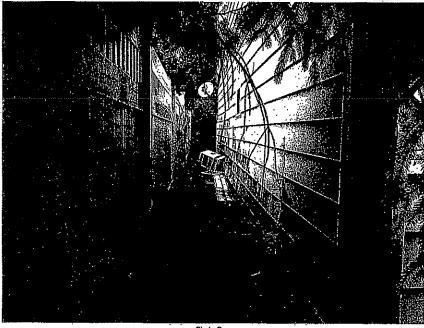
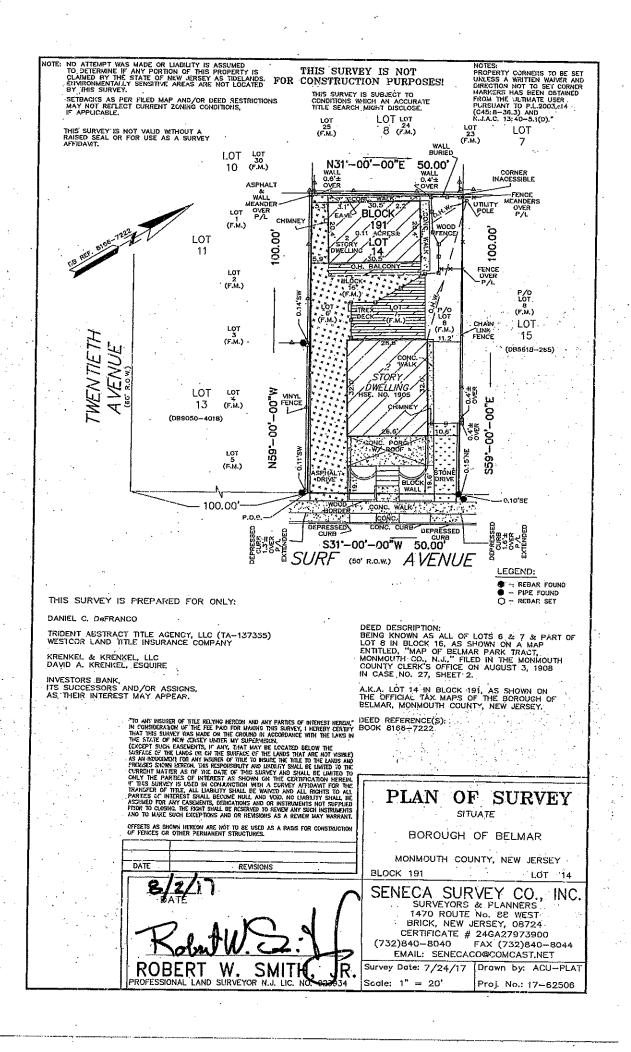


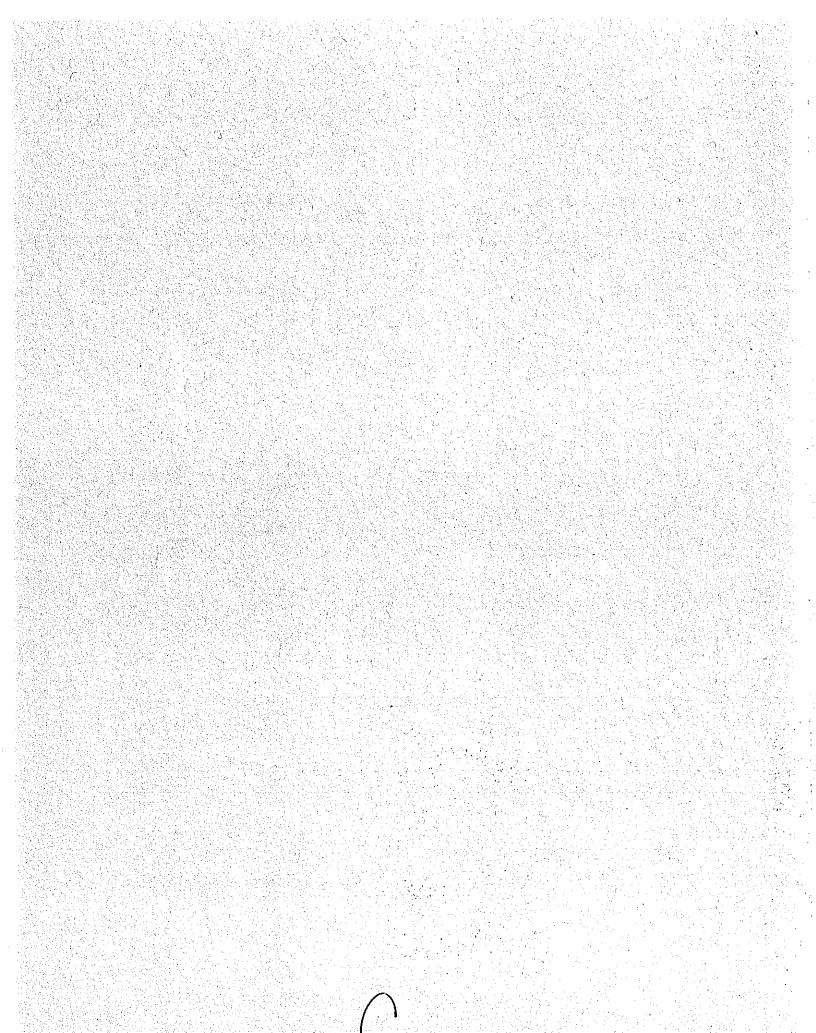
Photo One

Photo One Caption REAR



Photo Two Caption LEFT FEMA Form 086-0-33 (7/15)





Krenkel & Krenkel, LLC LISA C. KRENKEL, ESQ. (Attorney ID 000862000) 107 Main Street Allenhurst, NJ 07711 732-531-9300 732-531-9317 Attorneys for Daniel DeFranco

STATE OF NEW JERSEY MUNICIPAL COURT TOWNSHIP OF Belmar AFFIDAVIT OF Daniel DeFranco, Susan Tylka DEFENDANT.

- I, Susan Tylka, of full age hereby swear to the following:
- I was previously the owner of 1905 Surf Avenue, Belmar, NJ which is now owned by Daniel DeFranco.
 - I owned the property from 1991 through 2000.
 - 3. My current address is 2229 Ramshorn Drive, Allenwood, NJ.
- 4. I can state with certainty that the property located at 1905 Surf Avenue, Belmar, NJ had two driveways when I was the owner in fee and that the two driveways predated the 1992 ordinance.
- 5. I am available to testify if you should need me but I am 75 years old and I would prefer not to have to travel to Belmar if possible. I am also available by phone should the Zoning Officer need to reach me. My telephone number is (732) 223-2408.

I certify the foregoing statements made by me are true. I understand if any of the statements are willfully false, I am subject to punishment.

Susan Tylka

Subscribed and sworn to before me this

day of October 2019.

Notary Public State of New Jersey

Anne G. Summers ID# 2060806

NOTARY PUBLIC OF NEW JERSEY My Commission Expires Oct. 2019

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1905 Surf Ave





1905 Surf Ave

