GOMERY TOWNSHIP PERMIT APPLICATION

Township Use Only AMOUNT PAID \$ 50 - 353

CASH Or CHECK # DATE 1/29/2022

| Property Owner Roby A 22am Mailing Address (if different) | | | | L | - | ^ |
|--|-----------------|----------------|---------------|-----------------|-----------------|----------------|
| APPLICANT (if not owner): NameOwner's Agent Tenant Other AddressCityState Contact Person Daytime PhoneFaxEmail TYPE OF PERMIT REQUESTED (CHECK ALL THAT APPLY) New ConstructionDeckFenceAddition/AlterationAccessory BuildingLot Coverage(Conmercial) (Shed, Garage, etc.) (Patio, Driveway, etc.)Tenant Fit-Out Description of Project/Use (please be specific): | : K 2 | <u></u> | Lot | <u> </u> | Zoning District | |
| Property Owner Roby A22am Mailing Address (if different) | reet Address _ | 167 p) | iatz dr | ive | skill man | 08 2 28 |
| Daytime Phone Fax Email APPLICANT (if not owner): Name Owner's Agent Tenant Other Address City State Contact Person Daytime Phone Fax Email TYPE OF PERMIT REQUESTED (CHECK ALL THAT APPLY) New Construction Deck Fence Addition/Alteration Pool/Spa/Hot Tub Change Tenant/Use (Shed, Garage, etc.) (Patio, Driveway, etc.) Tenant Fit-Out Description of Project/Use (please be specific): Pool Patio Exi New Tenant New Use | | • | _ | | | |
| Owner's Agent Tenant Other Address | ailing Address | (if different) | | | City | State Zip Code |
| Daytime Phone Fax Email | aytime Phone | | | _ Fax | | Emai |
| Contact Person Daytime Phone Fax Email TYPE OF PERMIT REQUESTED (CHECK ALL THAT APPLY) New Construction Addition/Alteration Accessory Building (Shed, Garage, etc.) (Patio, Driveway, etc.) Description of Project/Use (please be specific): New Tenant New Tenant New Use CERTIFICATION: I hereby certify that I am either the legal property owner or authorized by the lemake this application. I understand that if any of the above statements are will subject to penalties. Townst | PPLICANT (if | not owner): | | | | |
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| New Tenant New Use | escription of P | oject/Use (ple | ease be speci | fic): <u>Po</u> | | |
| CERTIFICATION: I hereby certify that I am either the legal property owner or authorized by the lemake this application. I understand that if any of the above statements are will subject to penalties. Townsh | ommercial Che | nge of Tenant | /Use: Previo | us Tenant | | Existing Use |
| I hereby certify that I am either the legal property owner or authorized by the lemake this application. I understand that if any of the above statements are will subject to penalties. Townsh | | | | | | ~ = |
| Owner's Name Printed & Signature Date APPI Applicant's Name Printed & Signature Date | | Tenant | | | New Use | Sq. Ft |

350,00 Gill

JOSEPH PALMER Zoning Officer



PLANNING/ZONING DEPARTMENT

Municipal Building 2261 Van Horne Road (Route 206)

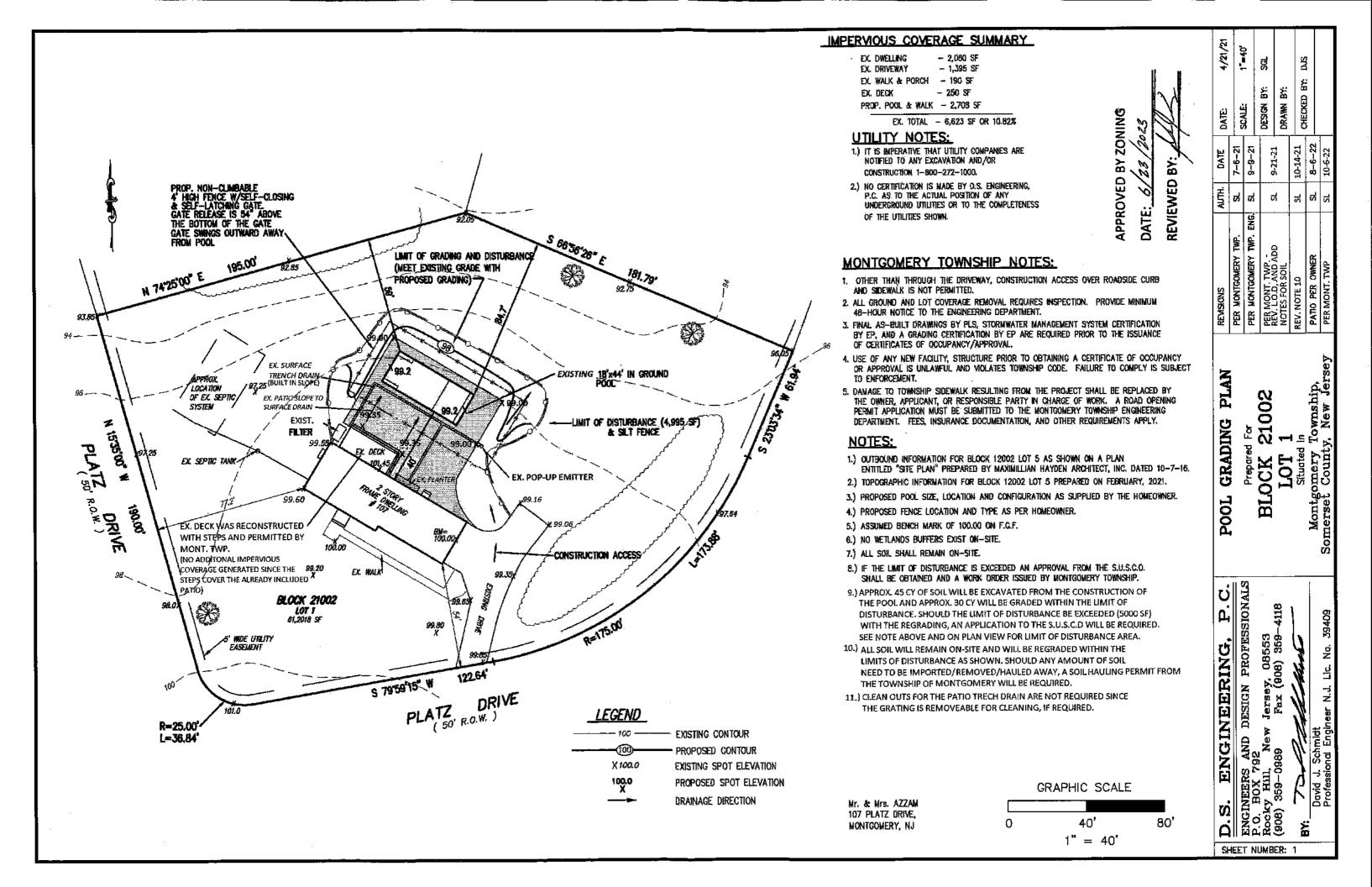
Belle Mead, New Jersey 08502-0001

Phone: (908) 359-8211 Fax: (908) 359-2006

E-Mail:

jpalmer@twp.montgomery.nj.us

| NAME Cobin HZZam | |
|--|---------------------|
| BLOCKLOT | |
| | |
| LOT COVERAGE CALCULATION WO | RKSHEET |
| FORMULA | 7.0 |
| SQUARE FOOTAGE OF LOT* | 1/1/1/1/1/ 61420 |
| TIMES – PERCENTAGE ALLOWED x | 15 |
| TOTAL LOT COVERAGE ALLOWED | 9, 213 |
| | |
| | 222 |
| FOOTPRINT AREA OF HOUSE (& all Decking) | 2330 |
| DRIVEWAY AREA | 1395 |
| SHED | 0 |
| WALKWAY(S) | 190 |
| PATIO(S) | 2708 |
| MISCELLANEOUS STRUCTURES (POOL, GAZEBO, DETACHED GARAGE, ETC.) | 1 0 |
| TOTAL (MUST BE LESS THAN TOTAL COVERAGE ALLOY | WED) 6623 |
| * ONE ACRE EQUALS 43,560 SQ. FT. | 9331 |



MEMORANDUM

| TO: CONSTRUCTION DEPARTMENT |
|---|
| FROM: HEALTH DEPARTMENT (£5) |
| DATE: 6 / 28 /2023 |
| SUBJECT: FOR YOUR FILE Block: 2/002 Lot: |
| Applicant Name: AZZAM Construction Type: Patio |
| Our records indicate that: |
| This Block and Lot is served by Public Water Sewer. |
| This addition will not increase the flow to the existing septic system. |
| The septic system is adequate in size to handle the added discharge from the proposed work. |
| The existing septic system will not be encroached upon by the proposed work, & all Health Dept setbacks will be maintained. |
| The existing well will not be encroached upon by the proposed work. |
| A waiver of setback requirement has been requested and granted. |
| There is nothing on file for the subject property, or the record is insufficient for this determination. The applicant has been advised to take the necessary steps to verify the system size and location. We will further advise when that has been accomplished. |
| The system is presently substandard and the applicant is aware of what must be done to bring it into compliance with our code. We will further advise you when we have issued a required septic system repair/alteration permit. |
| Special Requirements: |
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| |
| |
| We have notified the: |
| Applicant Contractor On: |