



Department of Community Development

820 Mercer Street, Cherry Hill, NJ 080002

856-488-7870 (Phone) 856-661-4746 (Fax)

www.Cherryhill-NJ.com

LAND USE DEVELOPMENT APPLICATION

Submission Date: 5/15/2025

Application No.: 25-Z-0025

☐ PLANNING BOARD

☒ ZONING BOARD OF ADJUSTMENT

FOR OFFICE USE ONLY

TAXES PAID YES/NO _____ (INITIAL)

FEES \$ 100.00 PROJ. # _____

ESCROW \$ 300.00 ESCR. # 10273

1. APPLICANT

Name: Carlos & Kelly Bivins

Address: 1381 Paddock Way

City: Cherry Hill State: NJ Zip: 08034

Phone: (609) 792-7537 Fax: ()

Email: kellybivins4@gmail.com

Interest in Property: owners

2. OWNER

Name: same

Address: _____

City: _____ State: _____ Zip: _____

Phone: () _____ Fax: () _____

Email: _____

3. TYPE OF APPLICATION (check all that apply)

- ☐ Minor Subdivision
- ☐ Preliminary Major Subdivision ¹
- ☐ Final Major Subdivision
- ☐ Minor Site Plan
- ☐ Preliminary Major Site Plan ¹
- ☐ Final Major Site Plan
- ☐ Amended Plan
- ☐ Site Plan Waiver
- ☐ Concept Plan

- ☐ Interpretation ¹
- ☐ Appeal of Administrative Officer's Decision
- ☐ Certificate of Non-Conformity
- ☐ Use (d) Variance ¹
- ☒ Bulk (c) Variance ¹
- ☐ Conditional Use ¹
- ☐ Street Vacation Request
- ☐ Rezoning Request ¹
- ☐ Other: _____

¹ Legal advertisement and notice is required to all property owners within 200 feet.

4. ZONE (check all that apply)

RESIDENTIAL		COMMERCIAL	OFFICE	OTHER	OVERLAY
RA	RA/PC	B1	O1	IR	FP
R1	R7	B2	O2	IN	SBC
<u>R2</u>	R10	B3	O3		IR/B
R3	R20	B4			A-H/C

5. ATTORNEY (A corporation, partnership, limited liability company or partnership must be represented by a New Jersey Attorney)

Name: N/A City: _____ State: _____ Zip: _____

Address: _____ Phone: () _____ Fax: () _____

Email: _____

6. APPLICANT'S PROFESSIONALS (Engineer, Surveyor, Planner, etc.)

Name: Steven R Kelly

Profession: Land Surveyor

Address: PO Box 24

City: Medford State: NT Zip: 08055

Phone: (860) 433-0384 Fax: ()

Email:

Name: Thomas B Wagner

Profession: Architect

Address: PO Box 2071

City: Haddonfield State: NT Zip: 08033

Phone: (856) 795-4550 Fax: (856) 795-1792

Email: tbwagnerarchitect@gmail.com

7. LOCATION OF PROPERTY

Street Address: 1381 Paddock Way Block(s): 436.01

Tract Area: Lot(s): 22

8. LAND USE

Existing Land Use: Residential

Proposed Land Use (be specific): Residential

9. PROPERTY

Number of Existing Lots: 1

Number of Proposed Lots: 1

Are there Existing Deed Restrictions or Easements?

Are there Proposed Deed Restrictions or Easements?

Proposed Form of Ownership:

☒ Fee Simple ☐ Condominium

☐ Rental ☐ Cooperative

☒ No ☐ Yes (please attach copies)

☒ No ☐ Yes (please attach copies)

10. UTILITIES (check all that apply)

☒ Public water

☒ Public sewer

☐ Private well

☐ Private septic system

11. APPLICATION SUBMISSION MATERIALS

List all plans, reports, photos, etc. (use additional sheets if necessary): Proposed Site Plan
From Thomas Wagner, Land Survey From Steven
Kelly, Photos #1 through 7

12. PREVIOUS OR PENDING APPLICATIONS

List all previous or pending applications for this parcel (use additional sheets if necessary): N/A

13. ZONING SCHEDULE (complete all that apply)

	REQUIRED	EXISTING	PROPOSED
Minimum Lot Requirements			
Lot Area			
Frontage			
Lot Depth			
Minimum Yard Requirements			
Front Yard			
Secondary Front Yard			
Rear Yard			
Side Yard			
Aggregate Side Yard			
Building Height			
Lot Requirements			
Residential Buffer Strip			
Open Space	25%		
Parking Setbacks			
Parking Setback to non-residential	5'		
Parking Setback to residential	15'		
Parking Setback to Right-of-Way	20'		

	REQUIRED	EXISTING	PROPOSED
Accessory Uses			
Garage Area			
Garage Height			
Fence Height	3'	Ø	6'
Pool Depth			
Shed Area			10x12
Shed Height			
Signage Requirements			
Façade Sign area 1			
Façade Sign area 2			
Freestanding Sign area			
Freestanding Sign height			
Functional Sign(s) area			
Building Façade area			
Distance from Driveway			
Distance from R.O.W.			

Is the proposed site on a inside or corner lot?

Inside

Corner

14. PARKING & LOADING REQUIREMENTS - N/A

Number of Parking Spaces REQUIRED: _____ Number of Loading Spaces REQUIRED: _____
 Number of Parking Spaces PROVIDED: _____ Number of Loading Spaces PROVIDED: _____

15. RELIEF REQUESTED (check all that apply)

- ☒ Zoning Variances are requested.
- ☐ Exceptions from Municipal Requirements are requested (N.J.S.A. 40:55D-51).
- ☐ Exceptions from New Jersey Residential Site Improvement Standards (R.S.I.S.) are requested (N.J.A.C. 5:21-3.1).
- ☐ Waivers from New Jersey Residential Site Improvement Standards (R.S.I.S.) are requested (N.J.A.C. 5:21-3.2).
 Requires application to and approval of the New Jersey Site Improvement Advisory Board.

For any type of the above relief requested, a separate exhibit should be attached stating the factual basis, legal theory, and/or previously granted relief.

16. SIGNATURE OF APPLICANT

I certify that the foregoing statements and the materials submitted are true. I further certify that I am the individual applicant, or that I am an Officer of the Corporate applicant and authorized to sign the application for the Corporation, or a General Partner of the partnership application.

SWORN & SUBSCRIBED to before me this

8 day of May, 2025 (year)
 [Signature] - Sapphire Ingleton (notary)

[Signature] 5-8-25
 SIGNATURE (applicant) DATE
 Kelly A Bivins
 PRINT NAME

SAPPHIRE INGLETON
 NOTARY PUBLIC
 STATE OF NEW JERSEY 9
 MY COMMISSION EXPIRES JUNE 5, 2029
 COMMISSION: #50222656

17. CONSENT OF OWNER

I certify that I am the Owner of the property which is the subject of this application, hereby consent to the making of this application and the approval of the plans submitted herewith. I further consent to the inspection of this property in connection with this application as deemed necessary by the municipal agency (if owned by a Corporation, a resolution must be attached authorizing the application and officer signature).

SWORN & SUBSCRIBED to before me this

8 day of May, 2025 (year)
S. Saphire Ingleton (notary)

Kelly A Bivins 5-8-25
 SIGNATURE (owner) DATE
Kelly A Bivins
 PRINT NAME

18. DISCLOSURE STATEMENT (Circle all that apply)

Pursuant to N.J.S.A. 40:55D-48.1 & 48.2, please answer the following questions:

Is this application to subdivide a parcel of land into six (6) or more lots? Yes ☒ No ☐
 Is this application for a variance to construct a multiple dwelling of twenty-five (25) or more units? Yes ☒ No ☐
 Is this application for approval of a site (or sites) for non-residential purposes? Yes ☒ No ☐
 Is the applicant a corporation? Yes ☒ No ☐
 Is the applicant a limited liability corporation? Yes ☒ No ☐
 Is the applicant a partnership? Yes ☒ No ☐

If you responded YES to any of the above, please answer the following (use additional sheets if necessary):

List the names and addresses of all stockholders or individual partners owning at least 10% in stock of any class or at least 10% of the interest in partnership (whichever is applicable).

Does a corporation or partnership own 10% or more of the stock in this corporation or partnership? If yes, list the names and addresses of stockholders of that corporation holding 10% or more of the stock or 10% or greater interest in that partnership (whichever is applicable). This requirement is to be followed by every corporate stockholder or partnership, until the names and addresses of the non-corporate stockholders and individual partners with 10% or more ownership have been listed.

Kelly A Bivins 4-17-25
 SIGNATURE (applicant) DATE

19. SURVEY WAIVER CERTIFICATION

As of the date of this application, I hereby certify that the survey submitted with this application, under the date of Feb 19, 2025 shows and discloses the premises in its entirety, described as Block(s) 436.01 Lot(s) 22; and I further certify that no buildings, fences, or other facilities have been constructed, installed, or otherwise located on the premises after the date of the survey with the exception of the structures shown.

State of New Jersey; County of Camden:

SWORN & SUBSCRIBED to before me this

8 day of May, 2025 (year)
S. Saphire Ingleton (notary)

Kelly A Bivins of full age, being duly
 PRINT NAME
Kelly A Bivins 5-8-25
 SIGNATURE (applicant/owner) DATE

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The application was reviewed in accordance with the rules of the applicable Board and Ordinances of the Township of Cherry Hill and determined that all the checklist items are in order and this application has been deemed complete. The time within which the applicable Board must act on this application pursuant to N.J.S.A. 40:55d-1 et seq., has commenced from this date.

SIGNATURE (administrative officer)

DATE