

FOR OFFICIAL USE ONLY

Planning Board

Zoning Board of Adjustment

Name of Application: _____ Docket Number : _____

PART A

Identify the matter before the Board:

Appeal (N.J.S.A. 40:55D-70a)

Interpretation (N.J.S.A. 40:55D-70b)

Certification of Pre-Existing Nonconforming Use

Other. Describe: _____

Explain, in detail sufficient for the Board to understand the nature of the proposal, issue, appeal, interpretation or matter:

Applicant is applying to the Zoning Board of Adjustment for a Certification of Pre-Existing Nonconforming Use. The property includes a main home and a detached building behind the house. The detached building has been occupied as a residence and the Applicant is requesting that the Board certify same as a pre-existing nonconforming use.

PART B

APPLICANT: Individual Partnership Corporation

APPLICANT: Owner Applicant Other _____

Name Xin Liu

Street Address One John F. Kennedy Boulevard Apt./Ste/Unit # Apt. 46C

City Somerset State N.J Zip Code 08873

Phone 732-301-4599 Fax _____

Email XinFoundHomes@gmail.com

OWNER (if different from Applicant):

Name Same as Applicant.
Street Address _____ Apt./Ste/Unit # _____
City _____ State _____ Zip Code _____
Phone _____ Fax _____
Email _____

PART C

SUBJECT PROPERTY:

Block/s 143 Lot/s 15-17 Zone R-7
Street Address 166 Victor Street
City Somerset State NJ Zip Code 08873

Has there been any previous appeal, request, or application to this or any other Township Boards involving this property? Yes No

If, yes, state type, docket number, the nature and date of such appeal: _____

How long has the present owner had title to this property? Since November 2, 2020.

Is the property under contract to be sold? Yes No

If yes, state the date of contract and name of the contract purchaser: _____

PART D

LIST OF PLANS, REPORTS AND OTHER MATERIALS SUBMITTED:

<u>Quantity:</u>	<u>Description of Item:</u>
<u>25</u>	<u>Survey</u>
<u>25</u>	<u>Type of Occupancy Report</u>
_____	_____
_____	_____
_____	_____

PART E

CONTACT PERSON INFORMATION/ CERTIFICATION

The person indicated below shall serve as the point-of-contact with the Township Department of Planning and Zoning and shall be the sole recipient of official correspondence from the Department. By signing this form, in Part H below, the Applicant and Owner certify that that the party listed below is authorized to act on their behalf as the designated contact person with the Department.

Owner Applicant Attorney Engineer Architect Other

Name Peter U. Lanfrit, Esq., Borrus, Goldin, Foley, Vignuolo, Hyman and Stahl, P.C.

Street Address 2875 US Route One Apt./Ste/Unit # _____

City North Brunswick State New Jersey Zip Code 08902

Phone 732-422-1000 Fax 732-422-1016

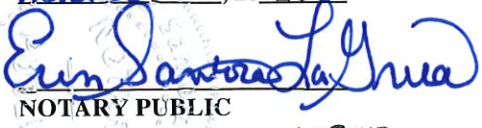
Email peter@borrus.com / erin@borrus.com

PART F

APPLICANT'S CERTIFICATION

I, Xin Liu, of full age, being duly sworn according to law and upon my oath, depose that: I reside at One John F. Kennedy Boulevard, Apt. 46C, Somerset in the County of Somerset and State of New Jersey, and that the above statements contained in this application and in the papers appended thereto are true. I further certify that I am the individual applicant, or a general partner of the partnership applicant, or an officer of the corporate applicant and I am authorized to sign the application for the partnership or corporation.

Sworn to and subscribed before me this 3rd day of November, 2020


NOTARY PUBLIC

Erin E. Santora LaGrua
NOTARY PUBLIC OF NEW JERSEY
My Commission Expires 8/20/2024


APPLICANT'S SIGNATURE

OWNER'S CERTIFICATION

(If the owner is a corporation, this section must be signed by an authorized corporate officer. If the owner is a partnership, this section must be signed by a general partner.)

I, Xin Liu, of full age, being duly sworn according to law and upon my oath depose that: I reside at One John F. Kennedy Boulevard, Apt. 46C, Somerset in the County of Somerset and State of New Jersey, and that the above statements contained in this application and in the papers appended thereto are true. I further certify that I am the owner of the property which is the subject of this application, and I am the applicant or I have authorized the applicant to make this application, and I agree to be bound by the application, the representations made and the decision in the same manner as if I were the applicant.

Xin Wei Liu
OWNER'S SIGNATURE

Sworn to and subscribed before
me this 3rd day of
November, 2020

Erin Santora LaGrua
NOTARY PUBLIC

Erin E. Santora LaGrua
NOTARY PUBLIC OF NEW JERSEY
My Commission Expires 8/20/2024