

CITY OF EGG HARBOR  
Municipal Building  
500 London Avenue  
Egg Harbor City, NJ 08215

EGG HARBOR CITY LAND USE BOARD

The application, with supporting documentation, must be filed with the City and must be delivered to the Board Attorney, Engineer and Planning Consultant for review at least (21) business days prior to the meeting at which the application is to be considered.

To be completed by City staff only

Date Filed 10-2-20

Application No. 2020-03 LUB

Land Use Board

Application Fees 250<sup>00</sup> check #5170

Escrow Deposit 350<sup>00</sup> check #5169

Scheduled for: Review for Completeness  Hearing Oct 20, 2020

1. SUBJECT PROPERTY

Location: 209-215 NEW YORK AVE EGG HARBOR CITY

Tax Map Page \_\_\_\_\_ Block 2.07 Lot(s) 27

Page \_\_\_\_\_ Block \_\_\_\_\_ Lot(s) \_\_\_\_\_

Dimensions Frontage 80 FT Depth 300 FT Total Area 24,000 SA

Zoning District B-22

2. APPLICANT

Name JOHN DONOVAN Telephone Number 609 517 4504

Address 304 NECTAR AVE GALLOWAY NJ 08205

Applicant is a Corporation \_\_\_\_\_ Partnership \_\_\_\_\_ Individual

3. DISCLOSURE STATEMENT

Pursuant to N.J.S.A. 40:55D-48.1, the names and addresses of all persons owning 10% of the stock in a corporate applicant or 10% interest in any partnership applicant must be disclosed. In accordance with N.J.S.A. 40:55D-48.2 that disclosure requirement applies to any corporation or partnership which owns more than 10% interest in the applicant followed up the chain of ownership until the names and addresses of the non-corporate stockholders and partners exceeding the 10% ownership criterion have been disclosed. (Attach pages as necessary to fully comply.)

Name \_\_\_\_\_ Address \_\_\_\_\_ Interest \_\_\_\_\_

Name \_\_\_\_\_ Address N/A Interest \_\_\_\_\_

Name \_\_\_\_\_ Address \_\_\_\_\_ Interest \_\_\_\_\_

Name \_\_\_\_\_ Address \_\_\_\_\_ Interest \_\_\_\_\_

Name \_\_\_\_\_ Address \_\_\_\_\_ Interest \_\_\_\_\_

4. If owner is other than the applicant, provide the following information on the

Owner's Name \_\_\_\_\_

Address N/A

Telephone Number \_\_\_\_\_

5. Property Information:

Restrictions, covenants, easements, association by-laws, existing or proposed on the property:

Yes (attach copies) \_\_\_\_\_ No  Proposed \_\_\_\_\_

Note: All deed restrictions, covenants, easements, association by-laws, existing and proposed must be submitted for review and must be written in easily understandable English in order to be approved.

Present use of the premises: VACANT LAND

\_\_\_\_\_  
\_\_\_\_\_

6. Applicant's Attorney \_\_\_\_\_

Address \_\_\_\_\_ N/A \_\_\_\_\_

Telephone Number \_\_\_\_\_

Fax Number \_\_\_\_\_

7. Applicant's Engineer \_\_\_\_\_ N/A \_\_\_\_\_

Address \_\_\_\_\_

Telephone Number \_\_\_\_\_

Fax Number \_\_\_\_\_

8. Applicant's Planning Consultant \_\_\_\_\_ @WATER \_\_\_\_\_

Address \_\_\_\_\_

Telephone \_\_\_\_\_

Fax Number \_\_\_\_\_

9. Applicant's Traffic Engineer \_\_\_\_\_

Address \_\_\_\_\_ N/A \_\_\_\_\_

Telephone Number \_\_\_\_\_

Fax Number \_\_\_\_\_

10. List any other expert who will submit a report or who will testify for the Applicant:  
(Attach additional sheets as may be necessary).

Name DANIEL DONOHUE

Field of Expertise GEOGRAPHIC INFORMATION SYSTEMS

Address 504 N. Main St. E. Raleigh, NC 27605

Telephone Number 604 771 2111

Fax Number \_\_\_\_\_

11. APPLICATION REPRESENTS A REQUEST FOR THE FOLLOWING:

**SUBDIVISION:**

1/1 Minor Subdivision Approval

1/1 Subdivision Approval (Preliminary)

1/1 Subdivision Approval (Final)

Number of lots to be created \_\_\_\_\_ Number of proposed dwelling unit's \_\_\_\_\_  
(Including remainder lot) (if applicable)

**SITE PLAN:**

\_\_\_\_\_ Minor Site Plan

\_\_\_\_\_ Preliminary Site Plan Approval (Phase (if applicable) \_\_\_\_\_)

\_\_\_\_\_ Final Site Plan Approval (Phase (if applicable) \_\_\_\_\_)

\_\_\_\_\_ Amendment or Revision to an Approved Site Plan

Area to be disturbed (square feet or acreage) 12,000 SQ

Number of proposed dwelling units (if applicable) 1

\_\_\_\_\_ Request for Waiver from Site Plan Review and Approval

Reason for request: \_\_\_\_\_

- \_\_\_\_\_ Informal Review
- \_\_\_\_\_ Request for Re Zoning and /or Amendment to Master Plan
- \_\_\_\_\_ Appeal decision of an Administrative Officer (N.J.S.A. 40:50D-70a)
- \_\_\_\_\_ Map or Ordinance Interpretation or Special Question (N.J.S.A. 40:55D-70b)
- Variance Relief (hardship) [N.J.S.A. 40:55D-70c (1)]
- \_\_\_\_\_ Variance Relief (substantial benefit) [N.J.S.A. 40:55D-70c (2)]
- \_\_\_\_\_ Variance Relief (use) [N.J.S.A. 40:55D-70d]
- \_\_\_\_\_ Conditional Use Approval [N.J.S.A. 40:55D-67]
- \_\_\_\_\_ Direct issuance of a permit for a structure in bed of a mapped street, public drainage way, or flood control basin [N.J.S.A. 40:55D-34]
- 1/1 Direct issuance of a permit for a lot lacking street frontage [N.J.S.A. 40:55D-34]
- \_\_\_\_\_ Other Relief [specify]

12. Section (s) of Ordinance from which a variance is requested: <sup>USED</sup>  
ORD. NO. 5-12 (ZONING SCHEDULE)  
LACK OF FRONTAGE (150 FT) IN R-22 DISTRICT OF  
EGG HARBOR CITY

13. Waivers Requested of Development Standards and/or Submission Requirements: [attach additional pages as needed]  
\_\_\_\_\_  
\_\_\_\_\_

14. Attach a copy of the Notice to appear in the official newspaper of the Municipality and to be mailed to the owners of all real property, as shown on the current tax duplicate, located with the State and within 200 feet in all directions of the property which is the subject of this application. The publications and the service on the affected owners must be accomplished at least 10 days prior to the date scheduled by the Administrative Officer for the hearing. An affidavit of service on all property owners and a proof of publication must be filed before the application will be complete and the hearing can proceed.

15. Explain in detail the exact nature of the application and the changes to be made at the premises, including the proposed use of the premises: [attach pages as needed]  
CONSTRUCTION OF SINGLE FAMILY HOME  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

16. Is a public water line available? YES

17. Is public sanitary sewer available? YES

18. Does the application propose a well and septic system? NO
19. Have any proposed new lots been reviewed with the Tax Assessor to determine appropriate lot and block numbers? NO
20. Are any off-tract improvements required or proposed? NO
21. Is the subdivision to be filed by Deed or Plat? N/A
22. What form of security does the applicant propose to provide as performance and Maintenance guarantees? ESCRO

23. Other approvals which may be required and date plans submitted:

	<u>Yes</u>	<u>No</u>	<u>Date Plans Submitted</u>
• City of Egg Harbor Water Department	.....	NO	.....
• City of Egg Harbor Sewerage Department	.....	NO	.....
• Atlantic County Board of Health	.....	NO	.....
• Atlantic County Health Department	.....	NO	.....
• Atlantic County Planning Board	.....	NO	.....
• Atlantic County Soil Conservation Dist.	.....	NO	.....
• NJ Council on Affordable Housing	.....	NO	.....
• NJ Department of Environmental Protection	.....	NO	.....
Sewer Extension Permit	.....	NO	.....
Sanitary Sewer Connection Permit	.....		.....
Stream Encroachment Permit	.....	NO	.....
Waterfront Development Permit	.....	NO	.....
Wetlands Permit	.....	NO	.....
Tidal Wetlands Permit	.....	NO	.....
Portable Water Construction Permit	.....	NO	.....
Other	.....		.....
• NJ Department of Transportation	.....	N/D	.....
• Public Service Electric & Gas Company	.....	NO	.....
• _____	.....		.....
• _____	.....		.....

24. Certification from the Tax Collector that all taxes due on the subject property have been paid
25. List of Maps, Reports and other materials accompanying the application (attach additional pages as required for complete listing).

It is the responsibility of the Applicant to mail or deliver copies of the application form and all supporting documents to the members of the professional staff [Engineer, Planning Consultant, Attorney for the Board to which the Applicant is submitted] for their review. The documentation must be received by the professional staff at least fifteen [15] business days prior to the meeting at which the application is to be considered, otherwise the application will be deemed incomplete. A list of the professional staff is attached to the application form.

Quantity	Description of Item
17	NEIGHBORHOOD MAP / SAMPLE BUILDING ENVELOPE
17	CERT. OF FILING → NJ PINELANDS COMMISSION

26. The Applicant hereby requests that copies of the reports of the professional staff reviewing the application be provided to the following of the applicant's professionals.

*Specify which reports are requested for each of the applicant's professionals or whether all reports should be submitted to the professional listed.*

<u>Applicant's Professional</u>	<u>Reports Requested</u>
Attorney	
Engineer	
All	JOHN DONOMOS 304 NECKER AVE GALLOWAY, NJ 08205 JDONOMOS55@gmail.com

EGG HARBOR CITY

SITE PLAN CHECKLIST

The following checklist is designed to assist applicants in preparing plans for Board review. Applicants should check off each item to ensure that it is included on the plan. ITEMS OMITTED MAY DELAY CONSIDERATION BY THE BOARD. Utility plans, landscaping plans architectural elevations, etc., may be shown on separate sheets.

- Name and title of applicant, owner and person preparing map.
- \_\_\_\_\_ Place for signature of Chairman and Secretary of Planning Board or Zoning Board of Adjustment.
- \_\_\_\_\_ Place for signature of municipal engineer.
- \_\_\_\_\_ Tax map lot and block numbers.
- \_\_\_\_\_ Date, scale and "north" sign.
- \_\_\_\_\_ Key map of the site with reference to surrounding areas and to existing street locations.
- \_\_\_\_\_ Zone district in which property in question falls, zone district of adjoining properties and all property within 200 foot radius of the property in question.
- \_\_\_\_\_ Name of owners of all contiguous land and adjacent property.
- \_\_\_\_\_ Dimensions of lots, setbacks, front yard, side yards and rear yard; size, kind and location of fences.
- \_\_\_\_\_ Location dimensions and details for all signs and exterior lighting including type of standards, location, radius of light and intensity in foot-candles.
- \_\_\_\_\_ The outside dimensions of existing and/or proposed principal building(s) and all accessory structures.
- \_\_\_\_\_ Storm drainage plan showing location of inlets, pipes swales, berms and other storm drainage facilities including roof leaders, indicate existing and proposed runoff calculations.
- \_\_\_\_\_ Rights-of-way, easements and all lands to be dedicated to the municipality or reserved for specific uses.



- \_\_\_\_\_ The entire property in question, even though only a portion of said property is involved in the site plan; provided, however, where it is physically impossible to show the entire property on the required sheet, a separate map at an appropriate scale may be submitted.
- \_\_\_\_\_ Significant existing physical features including streams, water courses, rock outcrop, swampy soil, etc.
- \_\_\_\_\_ Bearings and distances of property lines.
- \_\_\_\_\_ Plans of off-street parking area layout and off-street loading facilities showing location and dimensions of individual parking spaces, loading areas, aisles, traffic patterns and driveways for ingress and egress.
- \_\_\_\_\_ All driveways and streets within 200 feet of site.
- \_\_\_\_\_ All existing and proposed curbs and sidewalks.
- \_\_\_\_\_ Typical floor plans and elevations.
- \_\_\_\_\_ Existing and proposed sanitary sewerage disposal system. Show percolation test holes and results and soil log data.
- \_\_\_\_\_ Water supply system.
- \_\_\_\_\_ Method of solid waste disposal and storage and details for trash enclosures to located on-site.
- \_\_\_\_\_ Existing and proposed spot elevations based upon the U.S. Coastal Geodetic Datum at all building corners, all floor levels, center lines of abutting roads, top and bottom curbs, property corners, gutters and other pertinent locations.
- \_\_\_\_\_ Location of all existing trees or tree masses, indicating general sizes and species of trees.
- \_\_\_\_\_ Landscaping and buffering plan showing what will remain and what will be planted, indicating names of plants and trees and dimensions, approximate time of planting and method of planting (base rooted, ball and burlap).
- \_\_\_\_\_ Application form(s) signed by the applicant. If the applicant is not the owner, proof of owner's consent to filing the application.
- \_\_\_\_\_ If variances are required, proof of notification as required by the municipal Land Use Law.
- \_\_\_\_\_ Proof that all property taxes and utility fees are paid up to date.

\_\_\_\_\_ A list of all other approvals required, the current status of the approvals and copies of applications and/or decisions.

\_\_\_\_\_ All required application and escrow fees.

\_\_\_\_\_ Any other pertinent information as may be required by the Board.

CITY OF EGG HARBOR

LAND USE BOARD

Appeal # \_\_\_\_\_ Date \_\_\_\_\_

Block 2-07 Lot 27 Plate \_\_\_\_\_

Name: John Donohoe

209-215 NEW YORK AVE

EGG HARBOR CITY NJ

The Following taxes are paid: 2020 thru 7/31/20 Amount 623.49

The following taxes are not paid: \_\_\_\_\_ Amount \_\_\_\_\_

Jana W-GC  
TAX COLLECTOR

*I verify that this information accurately reflects  
municipal tax record*

Jana  
Tax Collector  
Egg Harbor City  
Atlantic County



To: Tax Assessor, City of Egg Harbor  
500 London Avenue  
Egg Harbor City, NJ 08215

I HEREBY REQUEST A CERTIFIED LIST OF PROPERTY OWNERS WITHIN TWO HUNDRED (200) FEET OF:

BLOCK 7.07 LOT 27

209-215 NEW YORK AVE EGG HARBOR CITY  
PROPERTY ADDRESS

ENCLOSED FIND FEE OF \$10.00, PAYABLE TO CITY OF EGG HARBOR AS REQUIRED FOR SAID CERTIFIED LIST

SIGNED: John Donohoe 6/29/20

PLEASE SEND CERTIFIED LIST TO:

NAME: JOHN DONOHOE

ADDRESS: 304 WECTAR AVE

GALLOWAY NJ 08205

PHONE: 609 517 4504

COPY

\_\_\_\_\_  
(DATE)


NOTICE:

NOTICE is hereby given that JOHN DONOHUE is appealing to the City of Egg Harbor Planning Board/Zoning Board of Adjustment to grant a variance as applied to property known as 209-215 NEW YORK AVE EGG HARBOR CITY and listed as Block 2-07, Lot (s) 27 on zone R22. Variance is requested to permit CONSTRUCTION OF SINGLE FAMILY HOME

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

A meeting will be held on \_\_\_\_\_, 20\_\_\_\_ at \_\_\_\_\_ PM in the Municipal Building, 500 London Avenue, Egg Harbor City, NJ.

A copy of my application may be seen in the Construction Office during regular office hours. If you have any objection to the granting of this variance, attend the meeting and you will be heard.

  
\_\_\_\_\_  
Signature of Applicant

## **CITY OF EGG HARBOR PROFESSIONALS**

**ENGINEERS:** Remington and Vernick Engineers  
845 N. Main Street, Suite 3  
Pleasantville, NJ 08232  
Telephone: (609) 645-7110  
Fax: (609) 645-7076

**LAND USE BOARD ATTORNEY:** Elias T. Manos, Esquire  
Manos Law Firm, LLC  
2408 New Road  
Suite 2  
Northfield, NJ 08225  
(609) 335-1873

### **IN HOUSE PROFESSIONALS**

**ZONING OFFICER:** Steve Hadley (609) 965-1616 ext. 109

**CONSTRUCTION OFFICIAL:** Richard Saunders (609) 965-1616 ext. 110

**CHIEF FINANCIAL OFFICER:** Jodi Kahn (609) 965-4683

**LAND USE & BUILDING  
DEPARTMENT OFFICE**

**MANAGER:** Donna Heffley (609) 965-1616 ext. 105  
donna@eggharborcity.org



State of New Jersey  
THE PINELANDS COMMISSION  
PO Box 359  
NEW LISBON, NJ 08064  
(609) 894-7300  
www.nj.gov/pinelands



PHILIP D. MURPHY  
Governor  
SHEILA Y. OLIVER  
Lt. Governor

General Information: Info@pinelands.nj.gov  
Application Specific Information: AppInfo@pinelands.nj.gov

SEAN W. EARLEN  
Chairman  
NANCY WITTENBERG  
Executive Director

June 1, 2018

Todd Waldie  
16 Harbor Drive  
Hammonton, NJ 08037

Re: Application # 2018-0078.001  
Block 2.07, Lots 27 & 28  
Egg Harbor City

Dear Mr. Waldie:

Pursuant to N.J.A.C. 7:50-4.34 of the Pinelands Comprehensive Management Plan, the completion of this application has resulted in the issuance of the enclosed *Certificate of Filing*.

The Certificate of Filing is not an approval. It is the document necessary to allow any municipal or county agency to review and act on the proposed development application. All municipal and county permits and approvals granted for the proposed development are subject to review by the Pinelands Commission. **No permit or approval shall take effect and no development may occur until the Commission issues a letter indicating that the municipal or county permit or approval may take effect.**

Upon receipt of any municipal or county permit or approval, please submit a copy to the Commission's office with the additional items listed on the enclosed *Local Agency Approval Submission Checklist*.

If you have any questions, please contact Branwen Ellis of our staff.

Sincerely,

for Charles M. Horner, P.P.  
Director of Regulatory Programs

Enc: Certificate of Filing  
Local Agency Approval Submission Checklist

c: Secretary, Egg Harbor City Planning Board (via email)  
Egg Harbor City Construction Code Official (via email)  
Atlantic County Department of Regional Planning and Development (via email)  
Dan Boddy (via email)



**FORM OF PROOF OF SERVICE**

STATE OF NEW JERSEY

SS:

COUNTY OF ATLANTIC

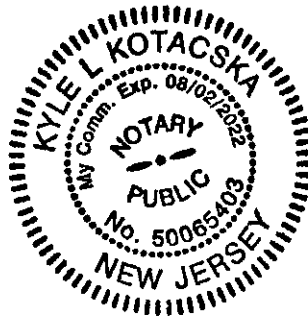
JOHN DONOHUE of full age, being duly sworn according to law, deposed and says,  
 that he/she resides at 304 WECTAR AVE the City of GALLOWAY  
 and State of NJ, that he is the applicant in a proceeding before the  
 Planning Board, Egg Harbor City, New Jersey, being an applicant under the Planning Ordinance  
 Of Egg Harbor City, and which has the Case No. 2020-03-LUB and relates to the premises at 209-215  
NEW YORKE AVE that he gave notice of this proceeding to each and all  
 Of the owners of property affected by said application according to NJSA 40:55D-12 by personal  
 Service of registered mail on the 10/10, A.D. 2020 a true copy of which  
 Notice is attached to this affidavit, together with the list of owners upon who said notice was  
 served and the mailing receipts for those served by certified mail.

Kyle L Kotacska  
 NOTARY PUBLIC

Sworn to before me on this 10th

Day of October, A.D. 2020

John Donohue  
 APPLICANT'S SIGNATURE





## EGG HARBOR CITY LAND USE BOARD

### Notice of Remote Access Public Hearing

Pursuant to the notice requirements of the New Jersey Municipal Land Use Law, N.J.S.A. 40:55D-11 and 12 et seq., and the pertinent provisions of the Land Development Code of the City of Egg Harbor, and the recent Operational Guidance, COVID-19: N.J.S.A. 40:55D-1 et seq. published by the New Jersey Division of Local Government Services on April 2, 2020 for noticing requirements for public meetings to be held by remote access only by video and audio means due to the COVID-19 health crisis, notice is hereby given that a written application, maps and supporting documentation have been filed by John Donohue with the Egg Harbor City Land Use Board. Pursuant to N.J.S.A. 40:55D-11, "Contents of notice of hearing on application for development", the following information is being provided:

1. Date, time and instructions to access and participate in the remote public hearing. A public hearing, remote access only by video and audio means, on the above mentioned application has been placed on the Board's agenda for its, Tuesday, October 20, 2020 meeting, which begins at 7:00 P.M. at which time any interested party will have an opportunity to be heard by accessing the video and audio of the hearing on the internet by typing <https://us02web.zoom.us/j/83317974099> into an internet browser. You may be required to download the Zoom meeting application at or prior to the time of the hearing. You may also participate in the meeting by accessing only the audio of the meeting by calling 1-301-715-8592 and entering Meeting ID 833 1797 4099.
2. The nature of the matters to be considered. The applicant is requesting "c" variance relief pursuant to N.J.S.A. 40:55D-70c from the minimum required lot frontage set forth the Land Development Code of the City of Egg Harbor, along with any and all other variances or waivers the Board may reasonably require in the exercise of its discretion, in order to allow the undersigned applicant to construct a single family dwelling on the property identified in section 3 below.
3. Identification of the property by lot and block numbers. The property that is the subject of this application is known as lot 27 in Block 2.07, aka 209-215 New York Avenue in Egg Harbor City, Atlantic County, New Jersey.
4. Access to the agenda and all documents related to the meeting and this particular application. The agenda and all documents pertaining to this application may be inspected by the public at least 10 days prior to the hearing by typing <https://www.eggharborcity.org/2020/10/10-20-20-land-use-board-meeting/> into an internet browser. If you do not have computer access or are otherwise unable to access the agenda and documents for the meeting, you may contact Donna Heffley, Board Secretary, during regular business hours, at 609-965-1616 or by email at [donna@eggharborcity.org](mailto:donna@eggharborcity.org) to make other arrangements to view or inspect same.

**John Donohue**  
Applicant  
304 Nectar Ave  
Galloway, New Jersey, 08205

7019 2280 0000 1907

Certified Mail Fee \$3.55		0201
Extra Services & Fees (check box, add fee as appropriate)		06
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00	Postmark Here
<input type="checkbox"/> Return Receipt (electronic)	\$0.00	
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00	
<input type="checkbox"/> Adult Signature Required	\$0.00	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00	
Postage	\$0.55	10/10/2020
Total Postage and Fees	\$4.10	
Sent To <b>J STRAUSSMAYER L GIEGOLD</b> Street and Apt. No., or PO Box No. <b>225 NEW YORK AVE</b> City, State, ZIP+4 <sup>®</sup> <b>EGG HARBOR CITY NJ 08215</b>		

**U.S. Postal Service™**  
**CERTIFIED MAIL® RECEIPT**  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.  
Egg Harbor City NJ 08215

Certified Mail Fee \$3.55		0201
Extra Services & Fees (check box, add fee as appropriate)		06
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00	Postmark Here
<input type="checkbox"/> Return Receipt (electronic)	\$0.00	
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00	
<input type="checkbox"/> Adult Signature Required	\$0.00	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00	
Postage	\$0.55	10/10/2020
Total Postage and Fees	\$4.10	
Sent To <b>BART ANDERSON</b> Street and Apt. No., or PO Box No. <b>1A ARAGO ST</b> City, State, ZIP+4 <sup>®</sup> <b>EGG HARBOR CITY NJ 08215</b>		

**U.S. Postal Service™**  
**CERTIFIED MAIL® RECEIPT**  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.  
Egg Harbor City NJ 08215

Certified Mail Fee \$3.55		0201
Extra Services & Fees (check box, add fee as appropriate)		06
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00	Postmark Here
<input type="checkbox"/> Return Receipt (electronic)	\$0.00	
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00	
<input type="checkbox"/> Adult Signature Required	\$0.00	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00	
Postage	\$0.55	10/10/2020
Total Postage and Fees	\$4.10	
Sent To <b>EDUARDO TORRES</b> Street and Apt. No., or PO Box No. <b>15 ARAGO ST</b> City, State, ZIP+4 <sup>®</sup> <b>EGG HARBOR CITY NJ 08215</b>		

7019 2280 0000 1907 6299

7019 0160 0000 0145

Certified Mail Fee \$3.55		0201
Extra Services & Fees (check box, add fee as appropriate)		06
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00	Postmark Here
<input type="checkbox"/> Return Receipt (electronic)	\$0.00	
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00	
<input type="checkbox"/> Adult Signature Required	\$0.00	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00	
Postage	\$0.55	10/10/2020
Total Postage and Fees	\$4.10	
Sent To <b>STRONG HOLDINGS, LLC</b> Street and Apt. No., or PO Box No. <b>333 BAYLAW CT</b> City, State, ZIP+4 <sup>®</sup> <b>VOORHEES NJ 08046</b>		

**U.S. Postal Service™**  
**CERTIFIED MAIL® RECEIPT**  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.  
Haddonfield NJ 08037

Certified Mail Fee \$3.55		0201
Extra Services & Fees (check box, add fee as appropriate)		06
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00	Postmark Here
<input type="checkbox"/> Return Receipt (electronic)	\$0.00	
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00	
<input type="checkbox"/> Adult Signature Required	\$0.00	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00	
Postage	\$0.55	10/10/2020
Total Postage and Fees	\$4.10	
Sent To <b>ATHANASIOS BARBARA GEORGIOULANDS</b> Street and Apt. No., or PO Box No. <b>2637 6TH AVE</b> City, State, ZIP+4 <sup>®</sup> <b>SWEETWATER NJ 08027</b>		

7020 1290 0000 0262 2355

**U.S. Postal Service™**  
**CERTIFIED MAIL® RECEIPT**  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.  
Trenton NJ 08610

Certified Mail Fee \$3.55		0201
Extra Services & Fees (check box, add fee as appropriate)		06
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00	Postmark Here
<input type="checkbox"/> Return Receipt (electronic)	\$0.00	
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00	
<input type="checkbox"/> Adult Signature Required	\$0.00	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00	
Postage	\$0.55	10/10/2020
Total Postage and Fees	\$4.10	
Sent To <b>NJ HOUSING MORTGAGE FINANC</b> Street and Apt. No., or PO Box No. <b>425 PHILLIPS BLVD</b> City, State, ZIP+4 <sup>®</sup> <b>EWING NJ 08618</b>		

7019 2280 0000 1907 6312

7019 2280 0000 1907

Certified Mail Fee	\$3.55	0201
Extra Services & Fees (check box, add fee as appropriate)	\$0.00	06
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00	
<input type="checkbox"/> Return Receipt (electronic)	\$0.00	
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00	
<input type="checkbox"/> Adult Signature Required	\$0.00	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00	
Postage	\$0.55	
Total Postage and Fees	\$4.10	10/10/2020

Sent To  
**JOHN GUERRA GUTTSCHALL**  
 Street and Apt. No., or PO Box No.  
**10 ARAGOST**  
 City, State, ZIP+4<sup>®</sup>  
**EGG HARBOR CITY NJ 08215**

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

7020 1290 0000 0262

Certified Mail Fee	\$3.55	0201
Extra Services & Fees (check box, add fee as appropriate)	\$0.00	06
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00	
<input type="checkbox"/> Return Receipt (electronic)	\$0.00	
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00	
<input type="checkbox"/> Adult Signature Required	\$0.00	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00	
Postage	\$0.55	
Total Postage and Fees	\$4.10	10/10/2020

Sent To  
**COMCAST**  
 Street and Apt. No., or PO Box No.  
**901 WEST LEEDS AVE**  
 City, State, ZIP+4<sup>®</sup>  
**LABECON NJ 08201**

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

U.S. Postal Service™  
**CERTIFIED MAIL® RECEIPT**  
 Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

May 15 2020 09:33 AM  
**OFFICIAL USE**

Certified Mail Fee	\$3.55	0201
Extra Services & Fees (check box, add fee as appropriate)	\$0.00	06
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00	
<input type="checkbox"/> Return Receipt (electronic)	\$0.00	
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00	
<input type="checkbox"/> Adult Signature Required	\$0.00	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00	
Postage	\$0.55	
Total Postage and Fees	\$4.10	10/10/2020

Sent To  
**ATLANTIC CITY ELECTRIC**  
 Street and Apt. No., or PO Box No.  
**5100 HARDING HIGHWAY 63 ML 22**  
 City, State, ZIP+4<sup>®</sup>  
**MAYS LANDING NJ 08330**

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

U.S. Postal Service™  
**CERTIFIED MAIL® RECEIPT**  
 Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

Ess Harbor City NJ 08215  
**OFFICIAL USE**

Certified Mail Fee	\$3.55	0201
Extra Services & Fees (check box, add fee as appropriate)	\$0.00	06
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00	
<input type="checkbox"/> Return Receipt (electronic)	\$0.00	
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00	
<input type="checkbox"/> Adult Signature Required	\$0.00	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00	
Postage	\$0.55	
Total Postage and Fees	\$4.10	10/10/2020

Sent To  
**KURT & REGINA KOSOWAN**  
 Street and Apt. No., or PO Box No.  
**17 ARAGOST**  
 City, State, ZIP+4<sup>®</sup>  
**EGG HARBOR CITY NJ 08215**

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

U.S. Postal Service™  
**CERTIFIED MAIL® RECEIPT**  
 Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

Berlin NJ 08009  
**OFFICIAL USE**

Certified Mail Fee	\$3.55	0201
Extra Services & Fees (check box, add fee as appropriate)	\$0.00	06
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00	
<input type="checkbox"/> Return Receipt (electronic)	\$0.00	
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00	
<input type="checkbox"/> Adult Signature Required	\$0.00	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00	
Postage	\$0.55	
Total Postage and Fees	\$4.10	10/10/2020

Sent To  
**VERIZON ENGINEERING DEPT**  
 Street and Apt. No., or PO Box No.  
**10 TANSBORO RD**  
 City, State, ZIP+4<sup>®</sup>  
**BERLIN NJ 08009**

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

U.S. Postal Service™  
**CERTIFIED MAIL® RECEIPT**  
 Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

Pleasantville NJ 08232  
**OFFICIAL USE**

Certified Mail Fee	\$3.55	0201
Extra Services & Fees (check box, add fee as appropriate)	\$0.00	06
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00	
<input type="checkbox"/> Return Receipt (electronic)	\$0.00	
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00	
<input type="checkbox"/> Adult Signature Required	\$0.00	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00	
Postage	\$0.55	
Total Postage and Fees	\$4.10	10/10/2020

Sent To  
**A.C.U.A**  
 Street and Apt. No., or PO Box No.  
**PO BOX 996**  
 City, State, ZIP+4<sup>®</sup>  
**PLEASANTVILLE NJ 08232**

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

7020 1290 0000 0262 2430

7020 1290 0000 0262 2454

7020 1290 0000 0262 2386

Certified Mail Fee \$3.55		0201
\$		06
Extra Services & Fees (check box, add fee as appropriate)		
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00	
<input type="checkbox"/> Return Receipt (electronic)	\$0.00	
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00	
<input type="checkbox"/> Adult Signature Required	\$0.00	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00	
Postage	\$0.55	
Total Postage and Fees	\$4.10	10/10/2020
Sent To <b>HERRY PEINS</b> Street and Apt. No., or PO Box No. <b>PO BOX 55</b> City, State, ZIP+4® <b>FORKED RIVER NJ 08721</b>		
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions		

**U.S. Postal Service™**  
**CERTIFIED MAIL® RECEIPT**  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

Certified Mail Fee \$3.55		0201
\$		06
Extra Services & Fees (check box, add fee as appropriate)		
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00	
<input type="checkbox"/> Return Receipt (electronic)	\$0.00	
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00	
<input type="checkbox"/> Adult Signature Required	\$0.00	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00	
Postage	\$0.55	
Total Postage and Fees	\$4.10	10/10/2020
Sent To <b>CATHERIN STOLT</b> Street and Apt. No., or PO Box No. <b>208 NEW YORK AVE</b> City, State, ZIP+4® <b>EGG HARBOR CITY NJ 08215</b>		
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions		

**U.S. Postal Service™**  
**CERTIFIED MAIL® RECEIPT**  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

Certified Mail Fee \$3.55		0201
\$		06
Extra Services & Fees (check box, add fee as appropriate)		
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00	
<input type="checkbox"/> Return Receipt (electronic)	\$0.00	
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00	
<input type="checkbox"/> Adult Signature Required	\$0.00	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00	
Postage	\$0.55	
Total Postage and Fees	\$4.10	10/10/2020
Sent To <b>DAVID &amp; DELIA ASUNCION</b> Street and Apt. No., or PO Box No. <b>220 NEW YORK AVE</b> City, State, ZIP+4® <b>EGG HARBOR CITY NJ 08215</b>		
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions		

7020 1290 0000 0262 2386

7019 2280 0000 1907

Certified Mail Fee \$3.55		0201
\$		06
Extra Services & Fees (check box, add fee as appropriate)		
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00	
<input type="checkbox"/> Return Receipt (electronic)	\$0.00	
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00	
<input type="checkbox"/> Adult Signature Required	\$0.00	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00	
Postage	\$0.55	
Total Postage and Fees	\$4.10	10/10/2020
Sent To <b>JOHN &amp; JUDY MENDEZ</b> Street and Apt. No., or PO Box No. <b>9 BARKOLA CT</b> City, State, ZIP+4® <b>TOWNS RIVER NJ 08753</b>		
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions		

**U.S. Postal Service™**  
**CERTIFIED MAIL® RECEIPT**  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

Certified Mail Fee \$3.55		0201
\$		06
Extra Services & Fees (check box, add fee as appropriate)		
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00	
<input type="checkbox"/> Return Receipt (electronic)	\$0.00	
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00	
<input type="checkbox"/> Adult Signature Required	\$0.00	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00	
Postage	\$0.55	
Total Postage and Fees	\$4.10	10/10/2020
Sent To <b>SOUTH JERSEY GAS CO</b> Street and Apt. No., or PO Box No. <b>151 PLAZA RT. 5A</b> City, State, ZIP+4® <b>FOLSOM NJ 08037</b>		
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions		

**U.S. Postal Service™**  
**CERTIFIED MAIL® RECEIPT**  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

Certified Mail Fee \$3.55		0201
\$		06
Extra Services & Fees (check box, add fee as appropriate)		
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00	
<input type="checkbox"/> Return Receipt (electronic)	\$0.00	
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00	
<input type="checkbox"/> Adult Signature Required	\$0.00	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00	
Postage	\$0.55	
Total Postage and Fees	\$4.10	10/10/2020
Sent To <b>DOMINICK DIPIETRO</b> Street and Apt. No., or PO Box No. <b>200 NEW YORK AVE</b> City, State, ZIP+4® <b>EGG HARBOR CITY NJ 08215</b>		
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instruction		

7020 1290 0000 0262 2379