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TOWNSHIP OF ELK
PLANNING BOARD

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LAND DEVELOPMENT APPLICATION
ELK TOWNSHIP, GLOUCESTER COUNTY, NEW JERSEY



Please complete all sections of the application form and submit all items required by the *Land Development Checklist* for your application. If you are requesting a waiver for any item, the request must be in writing and include written documentation in support of your waiver request(s). Any application that does not have all items submitted, or a waiver requested, will be deemed incomplete.

DO NOT PUBLISH PUBLIC NOTICE OR MAIL NOTICE TO THE OWNERS OF PROPERTY WITHIN 200 FEET UNTIL YOU HAVE RECEIVED THE DATE ASSIGNED FOR THE PUBLIC HEARING FROM THE BOARD SECRETARY.

To be completed by Township staff:

Date Filed: _____

Application Number: SD-26-01
Application/Escrow Fees: paid (2)

Date Deemed Incomplete: _____
Date Deemed Complete: _____

Date of Public Hearing: _____
Resolution Number: _____

Check all applicable:

- New Re-submission Concept
- Minor Subdivision Major Subdivision Variance(s)
- Minor Site Plan Major Site Plan
- Preliminary Approval Final Approval Amended Other _____
- Residential Commercial Industrial

1. Subject Property

Block(s): 186 Lot(s): 1 Zone Designation: MD Tax Map page: 41

Property Location: 244 Clinton Ave.

Dimensions: Frontage 200' Depth 220' Total Area 44,000 SF

2. Applicant's Name: Raul Castillo Luna

Company Name: _____

Address: 170 Carl Ave
Monroeville, NJ 08343

Phone Number: _____ email: _____

Applicant is a: Corporation Partnership Individual

Nature of Applicant's equitable/possessory interest in the land: _____

3. Property Owner's Name: Raul Castillo Luna

Company Name: _____

Address: Same

Phone Number: _____ email: _____

***All titled owners of the property must sign the application evidencing their consent to the application. Attach a separate sheet for signatures, if necessary, and provide a copy of the current deed of ownership.**

4. Attorney's Name: N/A

Firm: _____

Address: _____

Phone Number: _____ Fax #: _____ Email: _____

5. ^{Surveyor's} Engineer's Name: Erik Valentin, PLS

Firm: Ewing Assoc.

Address: 900 B. North Delsea Dr
Clayton NJ

Phone Number: 856 881 4931 Fax #: _____ Email: erik@ewingassoc.com

For Site Plans: NA

Commercial Industrial Other

Land to be developed _____ acres

Building size: NA # of parking spaces _____

Proposed use: _____

For Residential:

Area of entire tract 1.01 acres

Portion to be subdivided 1/2

of lots created 1 + remainder # of units planned _____

Proposed use: S.F.D

Does the application require any variances?

Yes

No *new*

(1 pre-existing)

Does the application require any conditional uses?

Yes

No

Please attach a separate sheet with a complete description of the variances requested and the reasons for relief. Please attach a statement as to the ways in which your project satisfies the requirements of the conditional uses. Your statements should cite the applicable Ordinance(s). Include the appropriate fees in your application and escrow fees.

Does the site front on a county road?

Yes

No

Route # 608

Does the site front on a state road?

Yes

No

Route # _____

Is the Site within 200 feet of another municipality?

Yes

No

Name: _____

List all outside agencies to which application has been made regarding the proposed development:

Gloucester Co. Planning

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

Yes (attach copies)

No

Proposed _____

***Note: Copies of All deed restrictions, covenants, easements, association by-laws, existing and proposed must be submitted for review.**

Present use of the premises:

One Single Family Dwelling

Proposed use:

One S.F.D. per lot, Engineering plans to be provided pending Minor Subdivision approval

8. Applicant's Planning Consultant: N/A

Address: _____

Phone Number: _____ Fax #: _____ Email: _____

9. Applicant's Traffic Engineer: NA

Address: _____

Phone Number: _____ Fax #: _____ Email: _____

10. List any other Expert who will submit a report or who will testify for the Applicant. (attach additional sheets if necessary)

Name: N/A

Field of expertise: _____

Address: _____

Phone Number: _____ Fax Number: _____

11. List all other witnesses who will testify at the public hearing on behalf of the Applicant. (attach additional sheets if necessary)

Name: N/A

Nature of testimony: _____

Name: _____

Nature of testimony: _____

12. **Subdivision:** Number of lots created (include remainder): 2

Number of proposed dwellings: ~~2~~ 1

Site Plan: Area to be disturbed (square feet) _____

Total number of proposed dwelling units: NA

Commercial square footage: _____

Site Plan Waiver: Reason for request: NA

Variance:

Request is hereby made for permission to erect, alter, convert, use, a parcel contrary to the requirements of the Township Ordinances or for other relief as follows:
(specify which ordinance sections are violated):

N/A

13. Said property has dimensions of 200x220 and area of 44000SF and is improved with the following structures: Dwelling
(If known, so indicate; or indicate whether dwelling or building; stating use thereof)

14. If less than the entire lot is to be utilized for the purpose hereinafter set forth, the area and dimensions of the portion of the lot to be utilized are: NA

15. Size of proposed building: To Be determined
Square footage of Building footprint: _____ Total Square footage: _____
Feet wide: _____ Height: _____
Stories: _____

16. Setbacks of building (corner properties have 2 fronts):
Front: _____ Rear: _____
Side: _____ Side: _____
% Building Coverage: _____
% Impervious Coverage: _____

17. Date property acquired: Dec 23

Prevailing zoning at time of acquisition: MD

Current Zoning: MD

18. Has there been any previous appeal, request, or application to this or any other Township Boards or the Construction Official involving these premises? Yes ✓ No

If YES, state the nature, date and the disposition of said matter and attach copies of all prior resolutions of this or any other Land Development Board.

19. For a variance - What are the EXCEPTIONAL conditions of property preventing the applicant from complying with the Zoning Ordinance(s) (i.e. the positive and negative criteria)?

N/A

20. For variances - Submit a statement of facts showing why relief can be granted without substantial detriment to the public good and will not substantially impair the intent and purpose of the zone plan and zoning ordinance.

N/A

21. All applicants must submit a copy of the Land Development Checklist and provide all of the information required in accordance with checklist. If waivers are sought, the applicant should submit a list of requested waivers with an explanation of the request.

22. Waivers requested of Development Standards and/or Submission Requirements (attach additional pages as needed):

See attached page

23. Explain in detail the exact nature of the application and the changes to be made at the premises, including the proposed use of premises (attach additional pages as needed):

24. Is a public water line available? Y N

~~25. Is public sanitary sewer available? Y N~~

26. Does the application propose a well and septic system? Y N Pending Sub. Appeal

27. Depict the location of the proposed well and septic on the plan submitted and the locations of any existing wells and septic systems on properties within 500 feet of the location of the proposed wells and septic systems.

28. Type of construction (frame, stone, brick, cement, etc.) _____

29. Present use of existing building(s) and premises: SFD

30. Total proposed dwelling units: 6

31. Total proposed professional offices: 0

32. Total proposed floor area: 0

33. Total proposed parking spaces: 0

34. Are there any off-tract improvements required or proposed? No

35. What form of security does the applicant propose to provide as performance and maintenance guarantees?
N/A

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

	Yes	No	Date Application Submitted
County Planning Board Approval	<u>X</u>	_____	_____
County Health Department	_____	_____	_____
County Soil Conservation District	_____	_____	_____
Elk Municipal Utilities Authority	_____	_____	_____
NJ Department of Transportation	_____	_____	_____
NJ Department of Environmental Protection	_____	_____	_____
Stream Encroachment Permit	_____	_____	_____
Waterfront Development Permit	_____	_____	_____
Wetlands Permit	_____	_____	_____
LOI (letter of Interpretation)	_____	_____	_____
Other _____	_____	_____	_____
Other _____	_____	_____	_____

I hereby consent to the filing of this application and consent to allowing Township representatives to perform on site visits. (Both signatures are required.)

Applicant's Signature: Raul Castille - Ince Date: 1-15-26

Owner's Signature: Raul Castille - Ince Date: 1-15-26

Date: _____

Sworn to and Subscribed before me this 15th day of January 2026.

ANN MARIE WEITZEL
Commission #50162680
NOTARY PUBLIC of NEW JERSEY
Gloucester County
Comm. Expires June 14, 2026

Ann Marie Weitzel
Notary Public

WAIVERS REQUESTED:

1. A WAIVER IS REQUESTED FROM CHECKLIST ITEM #48, #49, & #50, PROVIDING A TREE PROTECTION PLAN AND EXISTING TREE . SEE NOTE #11
2. A WAIVER IS REQUESTED FROM CHECKLIST ITEM #57, SUBMITTING GRADING PLANS, NO CONSTRUCTION IS BEING PROPOSED BY THIS PLAN. SEE NOTE #5
3. A WAIVER IS REQUESTED FROM CHECKLIST ITEM #58, PROVIDING A SOIL EROSION PLAN. SOIL EROSION PLANS TO BE SUBMITTED PENDING THE APPROVAL OF THIS PLAN AND PRIOR TO ANY NEW CONSTRUCTION.
4. A WAIVER IS REQUESTED FROM CHECKLIST ITEM #59, PROVIDING SOIL BORING LOCATIONS TO DETERMINE SOIL SUITABILITY. TO BE PROVIDED ALONG WITH SEPTIC PLANS.
5. A WAIVER IS REQUESTED FROM CHECKLIST ITEM #67, PROVIDING SOIL BORING LOCATIONS. TO BE PROVIDED

~~ALONG WITH SEPTIC PLANS PENDING APPROVAL OF THIS~~
PLAN.

From 24th Ave



From Clayton Ave