



Department of Community Development

820 Mercer Street, Cherry Hill, NJ 08002

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

www.Cherry Hill-NJ.com

LAND USE DEVELOPMENT APPLICATION

Submission Date: 11/24/2025

Application No.: 25-P-0033

PLANNING BOARD

ZONING BOARD OF ADJUSTMENT

FOR OFFICE USE ONLY

TAXES PAID YES/NO (INITIAL)

FEES \$ 600.00 PROJ. #

ESCROW \$ 4,500.00 ESCR. # 10283

1. APPLICANT

\*

Name: James Foley

Address: 309 OAK AVE

City: Cherry Hill State: NJ Zip:

Phone: (856) 857-8130 Fax: ( )

Email: [REDACTED]

Interest in Property: OWNER

2. OWNER

\*

Name: James Foley

Address: 479 RARITAN AVE

City: Avenel State: NJ Zip: 08002

Phone: (856) 857-8130 Fax: ( )

Email: [REDACTED]

3. TYPE OF APPLICATION (check all that apply)

- Minor Subdivision, Preliminary Major Subdivision, Final Major Subdivision, Minor Site Plan, Preliminary Major Site Plan, Final Major Site Plan, Amended Plan, Site Plan Waiver, Concept Plan, Interpretation, Appeal of Administrative Officer's Decision, Certificate of Non-Conformity, Use (d) Variance, Bulk (c) Variance, Conditional Use, Street Vacation Request, Rezoning Request, Other

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

4. ZONE (check all that apply)

Table with 5 columns: RESIDENTIAL, COMMERCIAL, OFFICE, OTHER, OVERLAY. Rows include RA, R1, R2, R3, RA/PC, R7, R10, R20, B1, B2, B3, B4, O1, O2, O3, IR, IN, FP, SBC, IR/B, 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: Brian S. Peterman, PE, CME  
Profession: NJ Professional Engineer  
Address: Peterman Maxcy Assoc., LLC  
189 S. Lakeview Drive, Suite 101  
City: Gibbsboro State: NJ Zip: 08026  
Phone: ( 856 ) 282.7444 Fax: ( N/A )  
Email: [REDACTED]

Name: \_\_\_\_\_  
Profession: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone: ( \_\_\_\_\_ ) \_\_\_\_\_ Fax: ( \_\_\_\_\_ )  
Email: \_\_\_\_\_

**7. LOCATION OF PROPERTY**

Street Address: 309 Oak Avenue Block(s): 289.05  
Tract Area: 37,161SF ( 0.85 Ac.) Lot(s): 6

**8. LAND USE**

Existing Land Use: Residential property containing a 2 story frame dwelling.

Proposed Land Use (be specific): \_\_\_\_\_

Proposing a minor subdivision to create two (2) lots. No further development proposed at this time.

**9. PROPERTY**

Number of Existing Lots: 1 Proposed Form of Ownership:  
 Fee Simple  Condominium  
Number of Proposed Lots: 2  Rental  Cooperative  
Are there Existing Deed Restrictions or Easements?  No  Yes (please attach copies)  
Are there Proposed Deed Restrictions or Easements?  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): \_\_\_\_\_  
Plan of Survey, Minor Subdivision Plan, photos of four (4) different views of the property,  
List of Requested Waivers and Deferrals.

**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
<b>Minimum Lot Requirements</b>			
Lot Area		S	
Frontage		E	
Lot Depth		E	
<b>Minimum Yard Requirements</b>			
Front Yard		A	
Secondary Front Yard		T	
Rear Yard		T	
Side Yard		A	
Aggregate Side Yard		C	
Building Height		H	
<b>Lot Requirements N/A</b>			
Residential Buffer Strip	N/A	D	
Open Space	25%		
<b>Parking Setbacks N/A</b>			
Parking Setback to non-residential	5'		
Parking Setback to residential	15'		
Parking Setback to Right-of-Way	20'		

	REQUIRED	EXISTING	PROPOSED
<b>Accessory Uses</b>			
Garage Area			
Garage Height			
Fence Height			
Pool Depth			
Shed Area			
Shed Height			
<b>Signage Requirements N/A</b>			
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**

Number of Parking Spaces REQUIRED: N/A      Number of Loading Spaces REQUIRED: N/A  
 Number of Parking Spaces PROVIDED: N/A      Number of Loading Spaces PROVIDED: N/A

**15. RELIEF REQUESTED** (check all that apply)

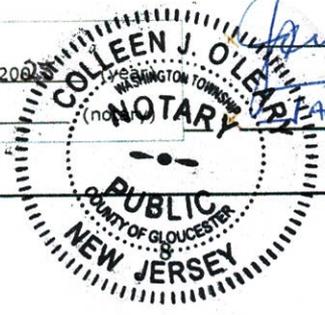
- Zoning Variances are requested.
- Exceptions from Municipal Requirements are requested (N.J.S.A. 40:55D-51).
- Exceptions from New Jersey Residential Site Improvement Standards (R.S.I.S.) are requested (N.J.A.C. 5:21-3.1).
- Waivers from New Jersey Residential Site Improvement Standards (R.S.I.S.) 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.

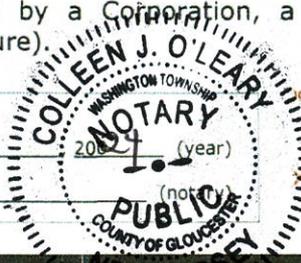
\* SWORN & SUBSCRIBED to before me this 13<sup>th</sup> day of August, 2008  
Colleen O'Leary  
 COLLEEN J. O'LEARY, Notary Public, County of Gloucester, New Jersey  
 SIGNATURE (applicant) [Signature] DATE 8-13-25  
 PRINT NAME DEANES FOLSY



**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  
13<sup>th</sup> day of August  
Colleen O'Leary



James Foley 8-13-25  
 SIGNATURE (owner) DATE  
James Foley  
 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 owing 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.

N/A  
 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 \_\_\_\_\_, 20\_\_\_\_ shows and discloses the premises in its entirety, described as Block(s) \_\_\_\_\_ Lot(s) \_\_\_\_\_; 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.

N/A State of New Jersey; County of Camden:

SWORN & SUBSCRIBED to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ (year)  
 \_\_\_\_\_ (notary)  
 \_\_\_\_\_ of full age, being duly  
 PRINT NAME  
 SIGNATURE (applicant/owner) DATE

**FOR OFFICE USE ONLY**

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