

CITY OF CAMDEN
DIVISION OF PLANNING
CITY HALL – ROOM 224
PO BOX 95120
CAMDEN, NEW JERSEY 08101-5120
(856) 757-7214

INSTRUCTIONS FOR ZONING/SIGN PERMIT APPLICATION

ALL APPLICANTS WHO NEED A ZONING/SIGN PERMIT MUST SUBMIT THE FOLLOWING:

1. Completed Zoning AND/OR Sign Application
2. Proof of ownership (deed, tax bill, or lease) (Leases must be notarized)
3. A detail floor plan of proposed use, conversion of single family dwelling shall have measurement of all habitable space. Accurate drawing of a proposed sign including dimensions and illustration signed by sign supplier. **Any addition or accessory uses or fences must have a Plot Plan and/or Survey. Additions/Fences must be presented on a Plot Plan/Survey with rear and side set back. You can obtain a Plot Plan from the Engineering Dept. located in City Hall, Room 325.**
*(copy of all/any plans must accompany application.)
4. Completed attached Tax Certification (**City of Camden Tax Office Room 117 1st floor plus Water/Sewer PNC Bank located Broadway & Market St.**)

5. Application fee:
(**non-refundable**)

Single Family Dwelling	\$ 69.56
Two-Family Dwelling	\$ 139.13
Three-Family Dwelling	\$ 215.51
Or More	
Rooming House	\$ 259.16
Boarding House	\$ 259.16
Commercial Use	\$ 87.30
Industrial Warehousing & Manufacturing Use	\$ 139.87
Institutional Use	\$ 69.56
Advertising Billboards	\$ 395.56
Sign Application	\$ 79.11
Rezoning Application	\$ 345.09

Money Order or Check payable to the City of Camden

PLEASE RETURN COMPLETED APPLICATIONS TO THE ABOVE ADDRESS. **INCOMPLETE APPLICATIONS SHALL NOT BE PROCESS. ANY APPLICATION WHICH REMAINS INCOMPLETE FOR MORE THAN 10 BUSINESS DAYS WILL BE DISCARDED.** FALSIFICATION IN ANY FORM SHALL SUBJECT APPLICANT TO A FINE OR MUNICIPAL COURT.

No construction, erection, alteration, repair, remodeling, conversion, renovation or demolition of any building or structure shall begin prior to Zoning approval. Other municipal agency approvals maybe required.

DO NOT REMOVE OR DISCARD ANY PART OF THIS APPLICATION

I. GENERAL

Today's Date: 11-14-2024

KIPP: Cooper Norcross,

Applicant: a New Jersey Nonprofit Corporation Telephone: 973-622-0905

Applicant's Address: 60 Park Place, Suite 802, Newark, NJ 07102

Applicant Interest: (please check one) () owner () tenant (x) agent/owner Contract Purchaser

SUBMITTING FOR: (x) Zoning Permit () Sign Permit

1. Name and Address of property OWNER if different from that of applicant:

City of Camden

520 Market Street, Camden, NJ 08101

2. Address and Block and Lot number for which zoning/sign permit is desired:

726 Kaighn Avenue Block: 405 Lot: 1, 7, 8 and 11

3.

Zone District:	R1	R2	R3	C1	C2	C3	C4	LH	LI2	GI1	GI2
(please circle)	US	PR1	OL1	TOD	MW1	MW2	MS	CV2	CC		
	Gateway Redevelopment Plan										

4. Historic District: n/a

5. What is the property/land **PRESENTLY** being used *entirely as*:

Vacant

6. Is the structure presently vacant? Yes If so how long? n/a

7. How many stories/floors does the building have? n/a Is there a basement/cellar? n/a

II. ZONING

1. What is being proposed?

New Construction X Addition _____ Fence X (ht 6') Installation _____

New Business _____ Conversion _____ Other (explain: _____)

2. Describe in detail the use & activities **PROPOSED** (attached separate sheet if necessary):

Athletic field for KIPP Cooper Norcross Academy

3. Are there other activities existing within the same property? n/a (please describe)

4. Dimensions of Principal Building and/or structure n/a

5. Dimensions of All Accessory Building and/or structure Press box (8' x 18')

Concession stand (10' x 26'), Storage room (20' x20'), Bathrooms (62' 8" x 25' 4")

6. Are any of the activities conducted in the principal building existing as a nonconforming use?

No X Yes _____ (please explain) _____

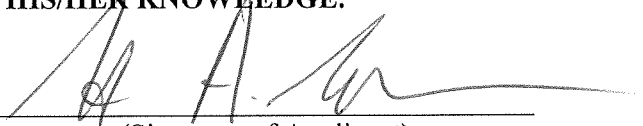
7. To the applicant's knowledge, has there been any prior applications made to the Zoning Board of Adjustment or the Planning Board?

No X Yes _____ (please explain) _____

=====

THIS APPLICANT CERTIFIES THAT THE ABOVE INFORMATION HAS BEEN COMPLETED TO THE BEST OF HIS/HER KNOWLEDGE.

11/14/24
(Date)


(Signature of Applicant)

Mitch Cooper, Managing Director of Operations
 KIPP: Cooper Norcross, a New Jersey Nonprofit Corporation
(Name of Corporation or Association)

DO NOT REMOVE OR DISCARD ANY PART OF THIS APPLICATION

N/A

III. SIGN

1. Type Sign: Awning / Billboard / Freestanding / Hanging / Mounted / Off Site / Window
(please circle)

Other (describe): _____ Alteration of an existing sign _____
(attach photo & describe) _____

2. Are there any existing signs? _____ (if yes, please attach photos)

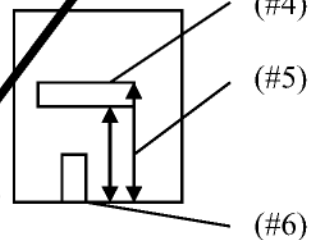
3. How many signs are proposed? _____

4. Will sign(s) be illuminated? Yes _____ No _____

5. Dimension: _____ X _____ = _____ sq ft.

6. Distance between ground and the lowest part of sign _____ ft.

7. Distance between ground and highest part of the sign _____ ft.



8. Material of Sign: _____

9. Color(s) on sign(s): _____

10. Illustration/Wording: _____

=====

THIS APPLICANT CERTIFIES THAT THE ABOVE INFORMATION HAS BEEN COMPLETED TO THE BEST OF HIS/HER KNOWLEDGE AND FURTHER UNDERSTANDS THAT IF THE SIGN EXCEEDS THE MAXIMUM REQUIREMENT A VARIANCE THROUGH THE PLANNING BOARD OF THE CITY OF CAMDEN MUST BE REQUESTED.

(Date)

(Signature of Applicant)

(Name of Corporation or Association)

DO NOT REMOVE OR DISCARD ANY PART OF THIS APPLICATION

PLEASE READ

ASSESSMENT CERTIFICATION

Section A: Applicant shall complete

SECTION A

OWNER

Name of OWNER of Property City of Camden

Address: 726 Kaighn Avenue

SEARCH Address: _____

Block: 405

Lot: 1,

Account: CCMUA Acct # 080217532

American Water Acct # 77-0701172-7

Section B: Applicant shall take this form to the City of Camden Tax Office, Room 117 (1st floor) for completion to indicate whether taxes are paid up to date. Applicant must also go to the PNC Bank (Broadway & Market St) for water and sewer to make sure water/sewer is paid up to date.

Upon completion, this form shall be submitted with original application. **NO APPLICATIONS WILL BE ACCEPTED -if any money is owed for Taxes or Water/Sewer, no permit can be issued until accounts are paid in full-proof of payment must be brought back before turning application in.**

Section C:

TAX OFFICE & PNC BANK

An application for Zoning/Sign permit has been submitted to the Division of Planning. Please check your records to be certain that the account is current

I HEREBY CERTIFY THAT THE PROPERTY ASSESSMENT ARE:

Account Type	Qtr.	Due date	Amount Owed	Other
(Taxes/ W&S /Other)	<u>Not</u>	<u>Billing</u>	<u>AH 11-7-</u>	<u>2024</u>
(Taxes /W&S/Other)	<u>4th</u>	<u>11/1/24</u>	<u>Not Being Billed</u>	<u>11/7/2024</u>
(Taxes/W&S/Other)	_____	_____	_____	_____
(Taxes/W&S/Other)	_____	_____	_____	_____

COMMENTS: _____

DATED: _____

PREPARED BY: _____

PLEASE READ

ASSESSMENT CERTIFICATION

Section A: Applicant shall complete

SECTION A

OWNER

Name of OWNER of Property City of Camden

Address: 726 Kaighn Avenue

SEARCH Address: _____

Block: 405

Lot: 1, ~~70000141~~

Account: CCMUA Acct # 080217532
American Water Acct # 77-0701172-7

Section B: Applicant shall take this form to the City of Camden Tax Office, Room 117 (1st floor) for completion to indicate whether taxes are paid up to date. Applicant must also go to the PNC Bank (Broadway & Market St) for water and sewer to make sure water/sewer is paid up to date.

Upon completion, this form shall be submitted with original application. **NO APPLICATIONS WILL BE ACCEPTED** -if any money is owed for Taxes or Water/Sewer, no permit can be issued until accounts are paid in full-proof of payment must be brought back before turning application in.

Section C: TAX OFFICE & PNC BANK

An application for Zoning/Sign permit has been submitted to the Division of Planning. Please check your records to be certain that the account is current

I HEREBY CERTIFY THAT THE PROPERTY ASSESSMENT ARE:

Account Type	Qtr.	Due date	Amount Owed	Other
<input checked="" type="checkbox"/> Taxes/W&S/Other	_____	_____	TAX EXEMPT	<u>AM</u> 11-12-24
<input type="checkbox"/> Taxes/W&S/Other	_____	_____	_____	_____
<input type="checkbox"/> Taxes/W&S/Other	_____	_____	_____	_____
<input type="checkbox"/> Taxes/W&S/Other	_____	_____	_____	_____

COMMENTS: _____

DATED: _____

PREPARED BY: _____

-
-
-
-
-
-
-
-
-

Notes Exist

Block: 405
 Lot: 1
 Qualifier: CAMDEN CITY
 Owner: CAMDEN CITY
 Prop Loc: 726 KAIGHN AVE

Account Id: 00007688

Year	Qtr	Type	Billed	Principal Balance	Interest	Total Balance
2018	4		2,597.34	.00	.00	.00
2018	3		2,597.34	.00	.00	.00
2018	2		4,707.08	.00	.00	.00
2018	1		4,707.11	.00	.00	.00
2018		Total	14,608.87	.00	.00	.00

Other Delinquent Balances: .00 Interest Date: 11/07/24

Other APR2 Threshold Amt: .00 Per Diem: .0000 Last Payment Date:

TOTAL TAX BALANCE DUE

Principal: .00 Penalty: .00

Misc Charges: .00 Interest: .00 Total: .00

* Indicates Adjusted Billing in a Tax Quarter