

NOTICE: WAIVER REQUESTS MADE IN CONNECTION WITH THIS APPLICATION FOR DEVELOPMENT MUST BE SO INDICATED AND WRITTEN JUSTIFICATION OF THE REQUEST MUST BE PROVIDED.

APPLICATION FOR DEVELOPMENT FORM

TYPE OF APPROVAL REQUESTED:

<input checked="" type="checkbox"/> Site Plan	<input type="checkbox"/> Minor Subdivision	<input type="checkbox"/> Development Permit
<input type="checkbox"/> Waiver	<input type="checkbox"/> Major Subdivision	<input type="checkbox"/> Development Permit Waiver
<input type="checkbox"/> Minor	<input type="checkbox"/> Sketch Plat	<input type="checkbox"/> Conditional Use
<input type="checkbox"/> Preliminary	<input type="checkbox"/> Preliminary	<input type="checkbox"/> Unimproved Road
<input type="checkbox"/> Final	<input type="checkbox"/> Final	<input type="checkbox"/> Major Site Plan
<input type="checkbox"/> Certificate of Nonconformity		

Variances: Use [x] Bulk (c) [] (a) [] (b) []

1. Location of proposed development 1224-1226 Kennedy Blvd., Bayonne, NJ
Block 25 Lot(s) 7 & 8 Zone District R-2
Proposed use interior alteration of the existing front commercial space at the mixed use building to incorporate a new commercial kitchen and a pharmacy service area.
Lot Area 40x100 Building area (sq. ft total) _____
Number of off-street parking spaces _____
Area (in feet) of any adjoining property controlled by owner _____

2. Name of Applicant: The Blvd 1224, LLC Phone No. 551-208-5984
Address: 1224 Kennedy Blvd. Bayonne, NJ 07002 E-mail: fahadfarooqi1@gmail.com & hybf1224@gmail.com
Name of Owner: St George Real Estate Inc. Phone No. _____
Address: 321 Dunhams Corner Rd, East Brunswick, NJ 08816 E-mail: _____

3. APPLICANT'S ATTORNEY AND EXPECTED WITNESSES:

Applicant's Attorney Peter Cecinini, Esq.
Address 1081 Avenue C, Bayonne, NJ 07002
Telephone Number 201-354-9305 Fax Number 201-603-6615
E-mail Address peter@ceciniilaw.com / jamie@ceciniilaw.com

Applicant's Engineer _____
Address _____
Telephone Number _____ Fax Number _____
E-mail Address _____

Applicant's Planning Consultant _____
Address _____
Telephone Number _____ Fax Number _____
E-mail Address _____

Applicant's Traffic Engineer _____
Address _____
Telephone Number _____ Fax Number _____
E-mail Address _____

4. List any other expert who will submit a report or who will testify for the Applicant: *[Attach additional sheets as may be necessary]*

Name Stephen Kawalek, RA, PP
Field of Expertise Architect
Address 772 1/2 Broadway, Bayonne, NJ 07002
Telephone Number 201-437-0648 / 551-208-9167 Fax Number: 201-535-8676
E-mail Address: steve.kawalek@gmail.com

All reports prepared in support of testimony should be submitted ten (10) days in advance of the public hearing.

5. Attach a detailed explanation (*Statement of the Applicant*) of the exact nature of the application and the changes to be made at the premises, including the proposed use of the premises.

6. Attach a copy of the proposed Notice to appear in the Jersey Journal / Star Ledger and to be mailed to the owners of all real property as shown on the property list obtained from the Tax Assessor, of the homeowners within 200 feet in all directions of the property which is the subject of this application. The Notice must specify the sections of the Ordinance from which relief is sought, if applicable.

The publication and the service on the affected owners must be accomplished at least 10 days prior to the date scheduled by the Board Secretary 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.

7. Dates and types of prior development applications for this property: TRC#25-690 completed 3/19/2025

Type of Use Proposed: Change in occupancy utilizing existing facilities
 Addition(s) or expansion of existing facilities
 All new construction
 Site work only
 Other

Present (or previous) use: mixed use deli & convenience store

Proposed use: interior alteration of the existing front commercial space at the mixed use building to incorporate a new commercial kitchen and a pharmacy service area.

Number of Employees 2-5 Business hours store hours as of now are 7 to 11pm (store hours to stay the same)
pharmacy hours will be 10-6pm (M-F)
10-3pm on Saturday and closed on Sunday

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: mixed use deli & convenience store

Is a public water line available? yes

Is public sanitary sewer available? yes

Are any off-tract improvements required or proposed? no

Is the subdivision to be filed by Deed or Plat? N/A

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

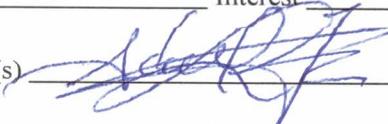
Other approvals, which may be required and date plans submitted:

	Yes	No	Date Plans Submitted
Passaic Valley Sewage Commissioners		<input checked="" type="checkbox"/>	
Bayonne Municipal Utilities Authority		<input checked="" type="checkbox"/>	
_____ Bayonne/Hudson County Health Dept.		<input checked="" type="checkbox"/>	
_____ Hudson County Planning Board	<input checked="" type="checkbox"/>		
_____ Hudson County Soil Conservation District		<input checked="" type="checkbox"/>	
NJ Department of Environmental Protection		<input checked="" type="checkbox"/>	
Sewer Extension Permit (TWA)		<input checked="" type="checkbox"/>	
Sanitary Sewer Connection Permit			
Stream Encroachment Permit		<input checked="" type="checkbox"/>	
Waterfront Development Permit		<input checked="" type="checkbox"/>	
Water Extension Permit		<input checked="" type="checkbox"/>	
Wetlands Permit		<input checked="" type="checkbox"/>	
Tidal Wetlands Permit		<input checked="" type="checkbox"/>	
Other (specify) _____		<input checked="" type="checkbox"/>	
NJ Department of Transportation		<input checked="" type="checkbox"/>	
Public Service Electric & Gas Company		<input checked="" type="checkbox"/>	

DISCLOSURE STATEMENT

Pursuant to N.J.S. 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. 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	<u>Adeel Aslam</u>	Address	_____	Interest	<u>100%</u>
Name	_____	Address	_____	Interest	_____
Name	_____	Address	_____	Interest	_____
Name	_____	Address	_____	Interest	_____
Name	_____	Address	_____	Interest	_____
Name	_____	Address	_____	Interest	_____

Applicant's Signature(s) 

Adeel Aslam, managing member of The Blvd 1224, LLC
Indicate title if corporation or partnership

VARIANCE RELIEF

1. Application is hereby made for:

_____ Hardship or practical difficulties (See N.J.S.A. 40:55D-70c)

_____ Use and/or structure (See N.J.S.A. 40:55D-70d)

2. Property Description:

Lot size 40x100 Size of Building: _____ No. of stories: 2

3. This request for variance relief consists of *(list sections of the Ordinance from which variance is requested)*: use for 1 & 2 family detached residential, minimal front yard, minimal rear yard, minimal side yard & max lot coverage.

_____ for the purpose of incorporating a commercial kitchen and pharmacy service area.

4. If this application includes both a use variance and either a site plan, subdivision, flood plain permit or conditional use relief, then indicate which of the following is presently being sought by the applicant:

_____ Applicant is presently only seeking the use variance with the subsequent relief to be considered following the granting of the use variance (bifurcate the application).

_____ Applicant is presently seeking all of the necessary relief.

5. Has there been a previous variance appeal or approval of any development application, i.e., site plan, subdivision or conditional use involving the premises? _____ Yes No

If so, attach copies of previous approvals and/or state the date, application number, character of appeal and disposition:

TRC#25-690 completed 3/19/2025

6. If the application is made for a bulk variance, explain the following:

How will the strict application of the provisions of the ordinance result impractical difficulties or hardship inconsistent with the general purpose or intent of the ordinance?

All bulk variances are due to existing non-conformities. No changes are proposed to the footprint of the building.

What are the exceptional circumstances or conditions applicable to the property involved or to the intended use or development of the property which do not apply generally to other properties in the same zone or neighborhood?

Explain what efforts have been made by the applicant to acquire adjoining lands so as to reduce the extent of the variance or eliminate the necessity for a variance.

N/A, acquiring adjoining properties would not reduce the need for variance relief.

Explain how the proposed variances can be granted:

a. without substantial detriment to the public good they are pre-existing.

b. without substantially impairing the intent and purpose of the Zoning Ordinance or Zone Plan they are pre-existing.

7. If the application is made for a use variance, explain the following:

a. how the proposed use can be granted without substantial detriment to the public good.

The use is pre-existing, adding a small kitchen and re-configuring the retail / pharmacy space is not a detriment.

b. how the proposed use can be granted without substantially impairing the intent and purpose of the Zone Plan and Zoning Ordinance.

c. List the "special reasons" presented by the application.

d. List here any "hardship" related to the nature of the land and/or the neighborhood and which prevents reasonable utilization of the property for any permitted use.

8. List all witnesses expected to testify:

Peter Cecinini, Esq.

Stephen Kawalek, RA, PP

9. Waivers requested of Development Standards, powers or exemptions from N.J. RSIS and/or Submission Requirements: *[attach additional pages as needed]* _____

CERTIFICATIONS

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 that I am authorized to sign the application for the corporation or that I am a general partner of the partnership applicant.

[If the owner is a corporation an authorized corporate officer must sign this application. If the owner is a partnership a general partner must sign this application.]

Sworn and subscribed to
before me this 18 day
of June, 2025

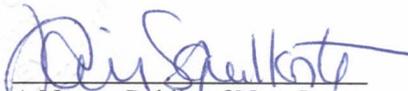

A Notary Public of New Jersey


Signature of Applicant

I certify that I am the Owner of the property which is the subject of this application and that I have authorized the applicant to make this application and that I agree to be bound by the application, the representations made and the decision in the same manner as if I were the applicant.

[If the owner is a corporation an authorized corporate officer must sign this application. If the owner is a partnership a general partner must sign this application.]

Sworn and subscribed to
before me this 18 day
of June, 2025


A Notary Public of New Jersey


Signature of Owner

I understand that I must submit escrow money in an amount to be determined by the Administrative Officer or his/her designee in accordance with §32-9.2 of the City of Bayonne Land Subdivision and Site Plan Ordinance, which amount will be deposited into an escrow account. I further understand that the escrow account is established to cover the cost of professional services including engineering, planning, legal and other expenses associated with the review of submitted materials and the publication of the decision by the Board. Sums not utilized in the review process shall be returned. If additional sums are deemed necessary, I understand that I will be notified of the required additional amount and shall add that sum to the escrow account within fifteen (15) days.

Date: 6/18/2025


Signature of Applicant

Jamie A. Squillante
NOTARY PUBLIC
STATE OF NEW JERSEY
MY COMMISSION EXPIRES OCTOBER 26, 2025

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