

ATLANTIC HIGHLANDS PLANNING BOARD  
APPLICATION FOR VARIANCE

1. I/we Michael Schueller + Ann Schueller, the applicant(s) herein, whose mailing address is 6 Prospect Ave  
Atlantic Highlands, NJ 07716  
and whose phone number is 717-319-8000 am/are the owner/contractor of property located at 6 Prospect Ave  
Atlantic Highlands, NJ 07716  
also designated as Block 74, Lot(s) 5 on the Tax Map of the Borough of Atlantic Highlands.
2. The Property is in the R-2 Zone, it has street frontage of 146.6' feet and an average depth of 135' feet and an area of 13,430 square feet. (acre)
3. The proposed percentage of lot coverage by both the existing structure and proposed additions will be 39.74%.
4. The following structures, buildings and/or uses are located on the property:  
Single-family home w/ inground pool and shed.
5. Application is hereby made for a variance to:  
Exceed allowable building coverage by 3.6% and to maintain the existing 10' 6" side setback unchanged and the existing lot area of 13,430 unchanged
6. The reason for this request and the grounds urged for the relief are as follows:  
See attached
7. The section(s) of the Borough Zoning Ordinance upon which this application is based is:  
Section 5-2, Schedule of Zone District Requirements
8. Property Tax & Water Bills have been paid through the 3rd quarter of 2024.
9. Has the property been separated from a larger tract of land? Yes      No ✓ if yes, when?       
Has the Planning Board approved the subdivision Yes      No ✓ if yes, when?
10. If there has been any previous appeal or application to the Planning Board involving the premises, state:  
Date of Filing: No Known prior applications  
Character of Appeal       
Disposition:

I/We the undersigned, certify that of all of the statements contained herein are true and correct to the best of my/our knowledge, information and belief.

Ann Schueller  
Applicant Signature

10/10/24  
Date

[Signature]  
Applicant Signature

10.10.24  
Date

Location sketch shall include the exact location of the property in question, giving the tax map lot and block numbers, the name of the street, the approximate distance to the nearest cross street and the direction of North. For a variance from the required minimum area or setbacks, the sketch should locate the buildings on the property. Show any other particulars that you would consider important for the Board to render its decision.



# **BOROUGH OF ATLANTIC HIGHLANDS**

100 FIRST AVENUE  
ATLANTIC HIGHLANDS, NJ 07716  
732-291-1444 FAX 291-9725  
WWW.AHNJ.COM CLERK@AHNJ.COM

**MICHELLE CLARK, ZONING OFFICER**

To: Michael Schoeller and Ann Schoeller  
6 Prospect Avenue

From: Michelle Clark  
Zoning Officer

Date: September 26, 2024

Re: Block 74, Lot 5, 6 Prospect Avenue

I have reviewed your application for construction of a 365 sf covered front porch to your single family residence in the R-2 Zone for compliance with the Borough of Atlantic Highlands Zoning Code.

The following approvals are necessary:

**Section 5-2**

Minimum Lot Area 15,000 sf required; 13,430 sf exists

Side Yard Setback 15' required; 10.6' exists

Max Building Coverage 15% permitted; 15.88% exists; 18.60% proposed

To proceed with an application to the Planning Board please contact Renee Frotton at 732-291-1444 ext 3108 or by email at [planningboard@ahnj.com](mailto:planningboard@ahnj.com)

Should you have any questions, please feel free to contact me.

cc: Renee Frotton, Board Secretary

**BOROUGH OF ATLANTIC HIGHLANDS**  
**APPLICATION FOR DEVELOPMENT PERMIT**

Instructions: Submit this completed application, copy of property survey, (2) copies of related plans. Property survey cannot be reduced or enlarged or be taken by facsimile transmission. \$40 NON REFUNDABLE FEE

PROPERTY INFORMATION: BLOCK 74 LOT(S) 5 ZONE R2

PROPERTY ADDRESS: 6 Prospect Avenue

Describe in detail the proposed development; include square footage, height, location, proposed use). If the application is for an addition, describe the purpose (ex: bedroom). If the application involves a change of use of the property, a separate narrative is suggested. If the property contains slopes, a steep slope permit must be obtained prior to any development.

Construct 365 sq covered front porch

Current use of property: Single-family home

Is the property located on a corner lot or abut more than one street? Yes \_\_\_\_\_ No ☒

If yes, name of street(s) \_\_\_\_\_

Does the property contain any easements or other restrictions? Yes \_\_\_\_\_ No ☒

Is the property situated within 50' of the following: ponds, streams, brooks, marshes, rivers, creeks, etc, or other low lying areas; or is the property located within 500' of the mean high water line or any area regulated by the Department of Environmental Protection? Yes \_\_\_\_\_ No ☒  
(if you answered yes, you must contact the NJDEP at 609-292-0060 to obtain clearance, prior to submitting this permit. Violations of the Wetlands could result in fines imposed by the State of New Jersey.)

PROPERTY OWNER Michael Schoeller and Ann Schoeller

Mailing Address 6 Prospect Avenue, Atlantic Highlands, NJ 07716

APPLICANT (if different than owner) \_\_\_\_\_

Mailing Address \_\_\_\_\_

PLEASE READ THE FOLLOWING: I hereby certify the (check one) ☒ I am the owner of the subject property; or ☐ I have permission from the property owner to submit this Application for Development. I certify, to the best of my knowledge all the information contained on this application is correct; and the survey provided is accurate and shows all structures located on the site. In addition, I grant permission to the Borough of Atlantic Highlands and their agents to come onto the subject property, for the purpose of conducting inspections, relating to this application.

DATE 9/26/24

SIGNATURE Michael Schoeller

\*\*\*\*\*This permit is issued for the purpose of property zoning only. Permit expires one year from the date of approval\*\*\*\*\*

DEVELOPMENT PERMIT APPROVED - CONDITIONS \_\_\_\_\_

X DEVELOPMENT PERMIT DENIED Please see attached letter

DATE 9-26-2024 ZONING OFFICER Nichelle Clark

CK# 101

24-09-08