

NOTICE OF VARIANCE APPLICATION

TO WHOM IT MAY CONCERN:

**PLEASE TAKE NOTICE that _____,
the undersigned, has/have appealed to the Zoning Board of Adjustment for a "C"
or "D" variance approval.**

The applicant does hereby propose to _____ (Give detailed information)

**which is contrary to Section 40: _____ of the Borough's Land Use Ordinance,
and, in addition, any and all other variances that may be deemed necessary on
premises located at**

**and also known as Block _____ Lot _____ on the
Tax Map of the Borough of Tinton Falls.**

**Any person or persons affected by this application may have an opportunity to be
heard at the Zoning Board of Adjustment meeting to be held on Thursday evening,
_____ 200__ at 7:30 p.m. at the Municipal Building,
556 Tinton Avenue, Tinton Falls, New Jersey.**

**A copy of the application has been filed in the Office of the Secretary of the Board
of Adjustment and may be inspected by the public between the hours of 9:00 a.m.
and 4:00 p.m. at the Municipal Building, 556 Tinton Avenue, Tinton Falls, New
Jersey.**

Signature of Applicant or Agent

***Note: This notice must be PERSONALLY SERVED or sent by CERTIFIED MAIL at
least TEN DAYS prior to the date of the hearing and Proof of Service given to the
Secretary of the Board of Adjustment AT LEAST TWO DAYS PRIOR to the hearing.***