

DAVID G. ESPOSITO, ESQ.  
119 Valley Forge Drive, PO BOX 1758  
Little Egg Harbor Twp., NJ 08087  
Florida Address 7727 Farrell Rd., Bokeelia Fl 33922 ( Mailing Only)  
609) 489-0100 (609) 939-1635 (FAX) email : dave@southernoceancountylaw.com

June 30, 2025

Sara Dela Cruz  
Land Use Review Board Secretary  
Borough of Ship Bottom  
1621 Long Beach Boulevard  
Ship Bottom NJ 08008



Re: Vandalay Enterprises LLC  
Blk 110 Lot 24;  
319 W 8<sup>th</sup> St ( this is a new/application for electronic sign ) – prior docket # 2025-01

Dear Ms Dela Cruz ,  
Attached in connection with the above, please find my clients completed application along with the sign specifications. Please note that my client was originally heard by the board under Docket # 2025-01 for which approval was granted. However, my client has found it necessary to apply for a variance for the sign use. He submitted a permit application for a sign which was granted. However, the installed sign is electronic.

If possible , we are requesting to be heard at the next available meeting. Please contact me with any questions ( cell 609-312-6543)

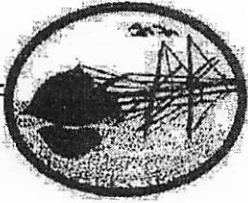
Reply be email to [dave@southernoceancountylaw.com](mailto:dave@southernoceancountylaw.com) is preferable.

Please reply to my New Jersey address : 119 Valley Forge Dr., Little Egg Harbor NJ 08087

Very truly yours,

David G Esposito

c.c. Joseph Coronato Sr. Esq.  
Frank Little Jr.



## BOROUGH OF SHIP BOTTOM

GATEWAY TO LONG BEACH ISLAND

1621 Long Beach Boulevard

Ship Bottom, Ocean County, N.J. 08008

(609) 494-2171 or 2172 Fax (609) 361-8484

### Note to Applicant:

When ready to file an application to come before the Land Use Review Board in the Borough of Ship Bottom please submit the following:

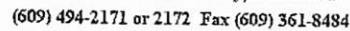
1. ☒ Completed original application including all supporting documents separated into 18 individual packets.
2. ☒ A detailed statement of operations for **commercial use**. Include number of employees, hours of operations, and days of week.
3. ☒ A PDF electronic version of the completed application emailed to [sdelacruz@shipbottom.org](mailto:sdelacruz@shipbottom.org)
4. ☐ Fees: Application and Escrow fee in two (2) separate checks made payable to the Borough of Ship Bottom. See the following link for fee schedule: <https://ecode360.com/35827301>
5. ☒ Certified list of property owners within 200 feet of the subject property from the Tax Assessor's Office
6. ☐ Certified mail receipts showing postal date stamp from letters sent to the property owners
7. ☐ Certification in writing from the Tax Collector that all taxes are paid in full for the current quarter
8. ☐ Original Affidavit of Proof of Service
9. ☐ Original Affidavit of Publication to Newspapers
10. ☐ Original Notice to Property Owners
11. ☒ Original Affidavit of Ownership by Business Entity
12. ☐ Original Affidavit of Ownership by an Individual
13. ☒ One (1) copy of this Checklist
14. ☐ Other Reports per Submission Checklist

If I can be of further assistance to you, please do not hesitate to contact my office.

Thank you,

*Sara Dela Cruz*

Land Use Review Board Secretary  
Borough of Ship Bottom  
1621 Long Beach Blvd.  
Ship Bottom NJ, 08008  
(609)494-2171 Ext. 122  
[www.shipbottom.org](http://www.shipbottom.org)



**5. PROPERTY INFORMATION**

Deed restrictions, covenants, easements, rights of way, association bylaws or other dedication existing or proposed on the property:

Yes (Attach copies) xx No. \_\_\_\_\_ Proposed \_\_\_\_\_

**Note:** All deed restrictions covenants, easement, rights of way association bylaws, or other dedications existing and proposed must be submitted for review.

**Site Plan and/or conditional use applicants:**

Proposal for: New structure \_\_\_\_\_ Expanded area \_\_\_\_\_ Alteration \_\_\_\_\_

Expansion of structure \_\_\_\_\_ Change of Use \_\_\_\_\_ Sign \_\_\_\_\_

Other (Please specify) \_\_\_\_\_

**Has this property been the subject of any prior application(s) to the Planning Board or Zoning Board of Adjustment?** Yes xx No \_\_\_\_\_ If so, please attach the date(s), the relief sought, the disposition of the case and a copy of the resolution(s).

**Is the subject property located on:**

A county road: Yes \_\_\_\_\_ No xx ; A State Road: Yes xx No \_\_\_\_\_ ;

Within 200 feet of a municipal boundary: Yes \_\_\_\_\_ No xx \_\_\_\_\_

**Present use of the premises:** D Finelli Construction and 2nd floor offices

6. **Applicant's Attorney** David G Esposito Esq  
Address PO Box 1758 , 119 Valley Forge Dr., Little Egg Harbor NJ 08087  
Telephone No. 609-312-6543 Fax No. 609-939-1635
7. **Applicant's Engineer** NA  
Address \_\_\_\_\_  
Telephone No. \_\_\_\_\_ Fax No. \_\_\_\_\_
8. **Applicant's Planning Consultant** NA  
Address \_\_\_\_\_  
Telephone No. \_\_\_\_\_ Fax No. \_\_\_\_\_
9. **Applicant's Architect** NA  
Address \_\_\_\_\_  
Telephone No. \_\_\_\_\_ Fax No. \_\_\_\_\_
10. **List any other Expert who will submit a report or who will testify for the Applicant: (Attach additional sheets as may be necessary)**  
Name TBD  
Field of Expertise \_\_\_\_\_  
Address \_\_\_\_\_  
Telephone No. \_\_\_\_\_ Fax No. \_\_\_\_\_

**11. APPLICATION REPRESENTS A REQUEST FOR THE FOLLOWING:**

**SUBDIVISION:**

\_\_\_\_\_ Minor subdivision Approval  
\_\_\_\_\_ Subdivision Approval (Preliminary)  
\_\_\_\_\_ Subdivision Approval (Final)

Number of lots to be created \_\_\_\_\_ Number of proposed dwelling units \_\_\_\_\_ (If applicable)  
Area and dimensions of each proposed lot \_\_\_\_\_

**SITE PLAN:**

\_\_\_\_\_ Minor Site Plan Approval  
\_\_\_\_\_ Preliminary Site Plan Approval [Phases (if applicable) \_\_\_\_\_]  
\_\_\_\_\_ Final Site Plan Approval [Phases (if applicable) \_\_\_\_\_]  
\_\_\_\_\_ Amendment or Revision to an Approved Site Plan Area to be disturbed (square feet) \_\_\_\_\_

Total number of proposed dwelling units \_\_\_\_\_

\_\_\_\_\_ Request for Waiver from Site Plan Review and Approval  
Reason for request: \_\_\_\_\_

\_\_\_\_\_ Informal Review  
\_\_\_\_\_ Appeal decision of an Administrative Officer [N.J.S.A. 40:55D-70a]  
\_\_\_\_\_ Map or Ordinance Interpretation or Special Question [N.J.S.A. 40:55D-70b]  
x \_\_\_\_\_ Variance Relief (hardship) [N.J.S.A. 40:55D-70c(1)]  
\_\_\_\_\_ Variance Relief (substantial benefit) [N.J.S.A. 40:55D-70c(2)]  
\_\_\_\_\_ Variance Relief (use) [N.J.S.A. 40:55D-70d]  
\_\_\_\_\_ Conditional Use Approval [N.J.S.A. 40:55D-67]  
\_\_\_\_\_ Direct issuance of a permit for a structure in bed of a mapped street, public drainage way, or flood control basin [N.J.S.A. 40:55D-34]  
\_\_\_\_\_ Direct issuance of a permit for a lot lacking street frontage [N.J.S.A. 40:55D-35]

**12. Section(s) of Ordinance from which a variance is requested:**  
16.52.130.1

**13. Waivers Requested of Development Standards and/or Submission Requirements: [attach additional pages as needed]**  
applicant is requesting all permissible waivers

**14. Attach a copy of the proposed Notice to appear in the official newspaper of the municipality and to be mailed to the owners of all real property, as shown on the current tax duplicate, located within the State and 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 Administrative Officer 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 hearing can proceed.**

**15. Explain in detail the exact nature of the application and the changes to be made at the premises, including the proposed use of the premises: [attach pages as needed]**  
~~Applicant sought sign permit for permitted use and permit issued after which it was determined that the sign type was not permitted and permit issued inadvertently. Applicant seeks variance to permit electronic sign for the premises~~

- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
16. Is a public water line available? yes
17. Is public sanitary sewer available? yes
18. Does the application propose any lighting? applicant is seeking variance for lighted electronics
19. Have any proposed new lots been reviewed with the Tax Assessor to determine appropriate lot and block number? NA
20. Are any off-tract improvements required or proposed? NA
21. Is the subdivision to be filed by Deed or Plat? NA
22. What form of security does the applicant propose to provide as performance and maintenance guarantees? as required
23. Other approvals which may be required and date plans submitted:

	Yes	No	Date Plans Submitted
_____ Ship Bottom Fire Prevention Bureau	_____	_____	_____
_____ Ship Bottom Water & Sewer Department	_____	_____	_____
_____ Ship Bottom Public Works Department	_____	_____	_____
_____ Long Beach Island Health Department	_____	_____	_____
_____ Ocean County Planning Board	_____	_____	_____
_____ Ocean County Soil Conservation District	_____	_____	_____
_____ NJ Dept. of Environmental Protection	_____	_____	_____
_____ Sanitary Sewer Connection Permit	_____	_____	_____
_____ Sewer Extension Permit	_____	_____	_____
_____ Waterfront Development Permit	_____	_____	_____
_____ Wetlands Permits	_____	_____	_____
_____ Tidal Wetlands Permit	_____	_____	_____
_____ FEMA	_____	_____	_____
_____ NJ Department of Transportation	_____	_____	_____
_____ Atlantic Electric	_____	_____	_____
_____ NJ Natural Gas	_____	_____	_____
_____ Other _____	_____	_____	_____

24. Certification from the Tax Collector that all taxes due on the subject property have been paid.
25. List of Maps, Reports and other materials accompanying the application (attach additional pages as required for complete listing).  
\*The documentation must be received by the Board Secretary at least twenty-one [21] days prior to the meeting at which the application is to be considered, or as otherwise required in Section 16.80.010 of the Land Development Ordinance. A list of the professional consultants is attached to the application form.

Quantity	Description of Item
_____	_____
_____	_____
_____	_____

26. The Applicant hereby requests that copies of the reports of the professional staff reviewing the application provided to the following of the applicant's professionals:

\*Specify which reports are requested for each of the applicant's professionals or whether all reports should be submitted to the professional listed.

xx	Applicant's Professional	Reports Requested
_____	Attorney	_____
_____	Engineer	_____
_____	_____	_____

#### CERTIFICATIONS

27. I certify that the foregoing statements and the materials submitted are true, and waive all applicable time limits until the first public hearing of this application. 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 applicant is a corporation this must be signed by an authorized corporate officer. If the applicant is a partnership, this must be signed by a general partner].

6/27/2025

DATE

SIGNATURE OF APPLICANT

6/27/2025

DATE

SIGNATURE OF OWNER

28. I, the Developer/Applicant understand that a sum, to be determined by the Administrative Officer, will be deposited in an Escrow Account, in accordance with the Ordinances of the Borough of Ship Bottom. I further understand that the escrow account is established to cover the cost of professional services including engineering, planning, legal and/or other expenses associated with the review of submitted materials. 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. I, the Developer/Applicant, as signed below acknowledge familiarity with the procedures set forth in the Ship Bottom Borough Land Development Ordinance for submittals and required action and agree to be bound by it.

6/27/2025

DATE

SIGNATURE OF OWNER OR APPLICANT

#### BOROUGH OF SHIP BOTTOM PROFESSIONAL CONSULTANTS

##### Land Use Board Attorney

Joseph D. Coronato, Sr., Esq.  
Coronato Law  
121 Washington Street  
Toms River, NJ 08753

Office: (732) 808-4600  
Fax: (732) 808-0449

##### Land Use Board Engineer/Planner

Frank J. Little, Jr., P.E., P.P.  
Owen Little & Associates  
443 Atlantic City Blvd.  
Beachwood, NJ 08722

Office: (732) 244-1090  
Fax: (732) 341-3412

## AFFIDAVIT OF OWNERSHIP

STATE OF NEW JERSEY :

: SS

COUNTY OF Ocean

Matthew David Finelli, of full age, being duly sworn according to law, on oath deposes and says that he or she resides at 198 Bernard Dr.  
                     in the Municipality of Manahawkin ( Stafford Twp)  
                     in the County of Ocean, and State of New Jersey  
                     that he or she is the owner in fee of all that certain lot, tract, or parcel of land, situated, lying and being in the Borough of Ship Bottom, Ocean County, New Jersey, and known and designated at Lot           , Block 110 and that he or she hereby authorizes and appoints David G Esposito, Esq as his or her attorney in fact to make the within application on his or her behalf to the Land Use Review Board of the Borough of Ship Bottom, Ocean County, New Jersey.

  
Signature

Sworn and subscribed before

me this 27th day

of June, 2025

  
PUBLIC NOTARY

DAVID G. ESPOSITO  
AN ATTORNEY AT LAW  
NEW JERSEY



## WAIVER OF TIME LIMITS

The undersigned, applicant in the matter pending before the Land Use Review Board, bearing Docket No. \_\_\_\_\_, hereby consents to the continuance of the hearing in said matter and further consents to a tolling of the time within which said Board must render a decision in the above matter. If at the time and place scheduled for continuance of this hearing a quorum of the Board is not present, said matter shall be further continued to the next succeeding regularly scheduled meeting of said Board.

/s/ David G Esposito Esq

(Applicant or Attorney)

Date: 6/27/2025