

APPLICATION FOR ACTION BY PLANNING BOARD
MARGATE, NEW JERSEY

PLEASE
TYPE OR
PRINT

1. **Date of Application:** 02/04/2020

2. **Zoning District:**

S-60	Single Family Residential	<input checked="" type="checkbox"/>	MF	Multi-Family Residential	<input type="checkbox"/>
S-60-WF	Single- Family Residential	<input type="checkbox"/>	CBD	Central Business District	<input type="checkbox"/>
S-50	Single Family Residential	<input type="checkbox"/>	C-1	Commercial	<input type="checkbox"/>
S-40	Single Family Residential	<input type="checkbox"/>	C-2	Commercial/Business	<input type="checkbox"/>
S-40-WF	Single-Family Residential	<input type="checkbox"/>	WSD	Waterfront Special District	<input type="checkbox"/>
S-30	Single Family Residential	<input type="checkbox"/>	R	Riparian	<input type="checkbox"/>
S-25	Single Family Residential	<input type="checkbox"/>	WAPC	Washington Avenue Pedestrian Corr.	<input type="checkbox"/>
S-25 (HD)	Historic Single Family Residential	<input type="checkbox"/>	WSPA	Government and Open Space	<input type="checkbox"/>
TF	Two-Family Residential	<input type="checkbox"/>	I	Institutional Use	<input type="checkbox"/>
B	Beach	<input type="checkbox"/>			

3. **Subject Parcel:**

Street Address(es) 210 N. Rumson Ave.
Block Number 419 Lot No(s) 17
Total Area (in square feet) 4320
Frontage: 54
Depth: 80

4. **Information about the Applicant:**

Full name(s) Suzanne Watson
If Business Entity, Names of Officers or Principals (Submit disclosure statement if appropriate)

Local Residence Address 210 N. Rumson Ave. Zip 08402
Other Residence Address _____ Zip _____
Business Address _____ Zip _____
Phone Number(s) (include area code);
Email Address suzannewatson13@comcast.net
Business _____ Fax _____ Cell Phone 609-377-4304

5. Interest in Subject Property:
 (Supply copies of relevant documents with this Application):

By lease dated _____

By Agreement of Sale dated _____

By Ownership of property since 07/2013

By other interest in law (describe):

6. If you do not own the Subject Property, provide the following regarding the Owner:

Name(s) _____

Address _____

Phone No. (include area code);

Res. _____

Bus. _____

Fax _____

Cell _____

7. Type of Application Applied For (check all applicable):

<input checked="" type="checkbox"/> C Variance(s)	<input type="checkbox"/> Minor Subdivision	<input type="checkbox"/> Interpretation (B Variance)
<input type="checkbox"/> D Variance(s)	<input type="checkbox"/> Major Subdivision	<input type="checkbox"/> Other (Explain)
<input type="checkbox"/> Minor Site Plan Action	<input type="checkbox"/> Conditional Use Permit	_____
<input type="checkbox"/> Major Site Plan Action	<input type="checkbox"/> Appeal (A)	_____

8. Application Made To: X Planning Board ___ Other

9. Professionals Representing the Applicant: (Check applicable professional and provide information)

___ Attorney: Name _____ Phone _____
 Address _____
 Fax _____ Cell _____ Email _____

___ Architect: Name _____ Phone _____
 Address _____
 Fax _____ Cell _____ Email _____

___ Engineer: Name _____ Phone _____
 Address _____
 Fax _____ Cell _____ Email _____

___ Preparer of Subdivision or Site Plan (if different from above)
 Name _____ Phone _____
 Address _____
 Fax _____ Cell _____

(Be sure to include all area codes and zip codes in the above)

10. If Site Plan Action is Required:

-What is the present use of the site and building(s)?

-How will this be changed?

11. If Subdivision Action is Required:

-After conferring with the City Tax Assessor, provide lot numbers of new lot(s), dimensions, and area of each: (use extra pages, if necessary)

Lot No(s)	Dimension(s)	Area(s)
_____	_____ x _____	_____ S.F.
_____	_____ x _____	_____ S.F.
_____	_____ x _____	_____ S.F.

-Purpose of the Subdivision

To sell lot(s)

To build and sell homes (or other buildings)

Other (please explain): _____

12. If Variances are Required:

(Note: Properly scaled site plan must show all dimensions relevant to variance analysis)

-Current use of lot(s) and building(s): residential

-Proposed use: same

-If a "D" or "Use" Variance is required, please explain: _____

-Regarding any dimensional variances required, please fill out the following chart:

Variance	Requirement of District	Present Condition	Proposed Condition
<u>side yard setback</u>	<u>8 feet</u>	<u>2 feet 8 inches</u>	<u>2 feet 8 inches</u>
_____	_____	_____	_____
_____	_____	_____	_____

13. Prior Action: Please detail any prior hearing and/or decision relevant to this application. Supply date, name of Board, and results. (IF YOU ARE NOT SURE PLEASE CHECK WITH EITHER BOARD ADMINISTRATOR.) If no prior action, write "none".

14. County and Other Agency Actions (Provide necessary dates and decisions):

Site Plan:

Subdivision:

Other:

15. Space for Narrative: In this space you must provide a general narrative description of what is being proposed, as well as any information not otherwise set forth above which may be relevant to the application, including justifications, clarifications and extenuating circumstances. FAILURE TO PROPERLY COMPLETE THIS SPACE WILL CONSTITUTE AN INCOMPLETE APPLICATION.

I am proposing to construct a traditional framed roof on an existing porch frame for my outdoor living space. The porch is currently framed for an awning that has been destroyed due to the high winds that we encounter on the island. The porch will be framed utilizing a drop beam supported by 6 x 6 structural posts which will be mounted to the existing masonry porch. The porch cap will be replaced with a pressure treated structural frame with a fiberglass finish. A new roofing system will be installed on the framed porch.

There is a vacant lot on the side of the house that requires a variance. To my knowledge, the current owner has no intention to sell.

16. Signature of Applicant(s):

Suzanne Watson

Date 2/4/2021

Date _____

17. This space for Board Administrator:

-Staff Committee action took place

1/11/21 and case assigned to the Planning Board for 2/25/21 or

-This application received by the

Planning Board Administrator on

Feb. 10, 2021

By: *Palma Accardi*

18. Notarized Statement by Applicant:

State of New Jersey } ss.

County of Atlantic }

ELIZABETH M. SCHUMAN being duly sworn according to law, deposes and says, that the statements contained in the above application and the statements contained in the papers submitted herewith are true.

Sworn to and subscribed before me this 4TH day of FEBRUARY, 2021

Elizabeth M. Schuman

ELIZABETH M. SCHUMAN
NOTARY PUBLIC OF NEW JERSEY
My Commission Expires 4/15/2024

LAND USE

Variance Application Checklist

VARIANCE CHECKLIST (Page 1 of 1)		Submitted	Waiver Requested
1.	Submit the following documents with the Standard Development Application: a. Copy of an area map showing all lots within 200 feet of the property. b. List of names, addresses, lot and block numbers, as they appear on the official tax records of the City, of all owners of property within 200 feet of the property affected by the application and upon whom the notice must be served in the manner provided by law. c. Copy of professional survey at a scale not smaller than 1" = 100' nor larger than 1/8" = 1'; clearly indicating the buildings and improvements thereon with all front, side and rear yard dimensions and setbacks from the property lines. d. Copies of subdivision, site plan or conditional use applications when applicable. e. Certification that taxes are paid.	✓ ✓ ✓ ✓	
2.	If the survey is more than one year old, attach certification of the applicant or owner that the survey accurately represents the status of the premises and all improvements at the time of filing for the variance, and show any proposed changes with all dimensions including enlargement of existing footprint, if applicable.	n/a	
3.	A statement containing the following information: a. Date of acquisition of property and from whom. b. The number of dwelling units in existing building(s). c. State whether the applicant or owners own or are under contract to purchase any adjoining lands. Set forth lot and block number(s). d. State whether the application is or is not to be accompanied by a separate application for subdivision, site plan or conditional use approval.	n/a	
4.	Ten (10) folded copies of a plot plan, map or survey.	✓	
	Checklist prepared by: <u>Suzanne Watson</u> Checklist reviewed by City: _____ Application found complete on: _____ Application found incomplete on: _____	Date: <u>2/9/2021</u> Date: _____	



**City of Margate City
Staff Committee Action - Planning Board**

Block	Lot	Applicant Name
419	17	Suzanne Watson
District	Address of Subject Application	
S-60	210 North Rumson Avenue	

Dear (Name of Submitting Party) Suzanne Watson

Your submittal was considered at the Staff Committee meeting of Monday, January 11, 2021

The action(s) required prior to building permit are:

staff committee met and agreed with the variances requested as it is the expansion of non-conforming setbacks. A zoning permit was denied because of the setback issues.

The matter will be placed on the agenda of the Planning Board at 6:30PM on Thursday, February 25, 2021

Applications will be accepted on a first-come first-served basis. If the agenda becomes over-crowded, you will be rescheduled the following month. If you decide, for whatever reason, not to appear on this date, you must notify the Board Administrator as early as possible. The following month's agenda cannot be guaranteed.

The following conditions and special considerations must be addressed as part of your application to the Board:

proposed sketches/ plans are required. checklist must be included as well.

APPLICATION FEES:

D Variance:	\$0.00	Court Reporter:	\$0.00
C Variance:	\$250.00	Other:	\$0.00
Site Plan:	\$0.00		\$0.00
Subdivision:	\$0.00		\$0.00
Conditional Use Permit:	\$0.00		\$0.00

Applicant shall combine all application fees into one separate check made out to the City of Margate. Escrow fees shall be a separate check made out to the City of Margate. NOTE: If an Escrow deposit is requested, a W9 form must be submitted with the Escrow check. Any Escrow funds will be refunded to the name and address indicated on the W9 form.

Please note that in proceeding further with the formal Board Application, you are responsible for satisfying all of the checklist particulars in the appropriate section(s) of the Administrative Regulations. The instructions and checklist for your particular application can be found on the following pages of this booklet: 1-13

You must also comply with the more detailed requirements of the Margate City Land Development Ordinance.

In order for you to be able to appear on the Board Agenda as per the above date, all application material must be submitted by 11:00am, Tuesday, February 23, 2021

Palma Accardi
Planning Board Administrator
Monday, January 11, 2021

City of Margate City
Staff Committee Review Application
Please Type or Print Neatly • \$25 Submittal Fee

Office Use Only:	Date Submitted: <u>12/16/2020</u>	Received By: <u>Palma</u>
	Paid: <u>\$25</u> Check/Receipt #: <u>248</u>	Board Administrator or Zoning Officer

Staff Committee meetings are held as needed. Contents must comply in all particulars with the Administrative Regulations for Processing Planning Board Applications, sections on Staff Committee Review. The Board Administrator and other City Hall staff will answer reasonable questions regarding this procedure. They cannot, however, fill out these forms for you.

1. Date of Application: 11/20/2020
2. Submitted by – Name: Suzanne Watson Phone No.: 609-377-4304
Address: 210 N. Rumson Ave.
Email Address: suzannewatson13@comcast.net

3. If the party submitting this form is other than the potential Applicant for Board action (attorney, architect, builder, engineer, etc.), then who would the APPLICANT be?

Name: _____ Phone No.: _____
Address: _____
Email Address: _____

4. The applicant would be (Check one):

- Owner Buyer under Agreement of Sale
 Tenant Other: _____

5. If the applicant for Board action would be Tenant or Buyer, who is the present OWNER?

Name: _____ Phone No.: _____
Address: _____

6. **Proposed Action is Located as Follows:**

Street Address: 210 N. Rumson Ave. Block: 419 Lot(s): 17
Zoning District: S-60

7. Describe site (and buildings, if any) as existing now: (THIS SECTION MUST BE COMPLETED)

Split level single family residence

8. Answer the following as to:	<u>Existing Condition</u>	<u>Proposed Condition</u>
a. Size and Dimension of Lot:	<u>54' x 80'</u>	<u>same</u>
b. Size, Dimensions of Buildings:	<u>43.2' x 56.3'</u>	<u>same</u>
c. Height of Buildings (Feet):	<u>East side 38' West side 35'</u>	<u>same</u>
d. Height of Buildings (Stories):	<u>2 story split</u>	<u>same</u>
e. % of Coverage on Land:	<u>55%</u>	<u>same</u>
f. Front Yard Setback:	<u>17.3</u>	<u>same</u>
g. Rear Yard Setback:	<u>east 25 west 8</u>	<u>same</u>
h. Side Yard Setbacks:	<u>east 8 west 2.8</u>	<u>same</u>

9. According to the Administrative Regulations, a scaled drawing must accompany this Application. If available, a survey would be appreciated. In addition, use this space to provide a detailed narrative description of the proposed action. Attach additional paper, if necessary:

(THIS SECTION MUST BE COMPLETED)

I would like to construct a traditional framed porch covering on an existing porch frame.
The porch will be framed utilizing a drop beam supported by 6 x 6 structural posts which will be mounted to the existing masonry porch. The porch cap will be replaced with a pressure treated structural frame with a fiberglass finish. A new roofing system will be installed on the framed porch.

10. Although the Staff Committee will determine the correct legal steps, what are the actions requested. (check more than one, if applicable):

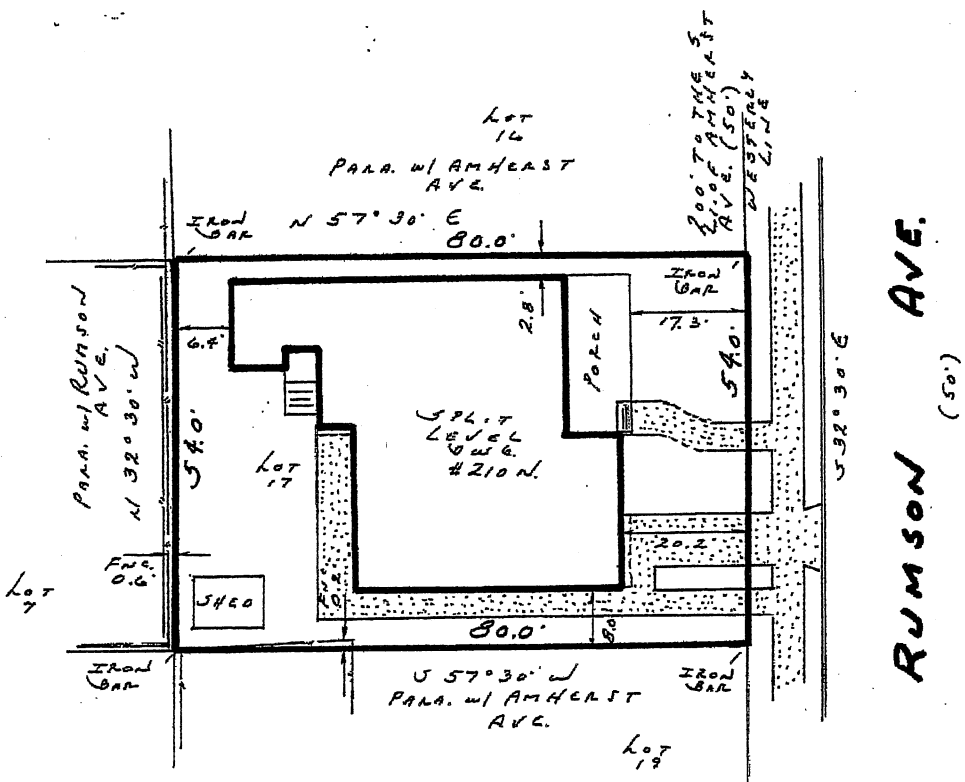
- | | |
|---|---|
| <input type="checkbox"/> Subdivision | <input type="checkbox"/> Site Plan |
| <input type="checkbox"/> C-Variance(s) | <input type="checkbox"/> Conditional Use Permit |
| <input type="checkbox"/> D-(Use) Variance | <input checked="" type="checkbox"/> Other: <u>Expansion</u> |

11. Which variances are needed, if any? Expansion of a non conforming setback

12. IF THERE HAS BEEN ANY PREVIOUS STAFF COMMITTEE OR FORMAL BOARD APPLICATION AND/OR ACTION ON THIS PROPOSAL PROPERTY, PLEASE ATTACH RELEVANT DOCUMENTS, AND PROVIDE INFORMATION HERE: _____

Signature of Submitting Party: Suzanne Watson

Print or Type Name: Suzanne Watson

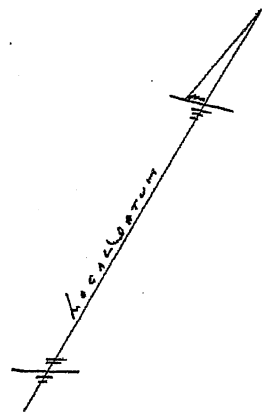


DEED DESCRIPTION

Description of a certain tract or parcel of land situate in the City of Margate, County of Atlantic, State of New Jersey, being designated as Lot 17 in Block 419 on the current official tax map and being more particularly described as follows:

Beginning at a point in the Westerly line of Rumson Ave. (50' wide) South 32 degrees 30 minutes East 200.0 feet from the Southerly line of Amherst Ave. (50' wide) said beginning point being in the division line between lots 16 and 17 block 419 and from thence running;

1. South 32 degrees 30 minutes East along the Westerly line of Rumson Ave. a distance of 54.0 feet to a point in the division line between lots 17 and 19 block 419; thence
2. South 57 degrees 30 minutes West along last mentioned division line and parallel with Amherst Ave. a distance of 80.0 feet to a point in the division line between lots 7 and 17 block 419; thence
3. North 32 degrees 30 minutes West along last mentioned division line and parallel with Rumson Ave. a distance of 54.0 feet to a point in the division line between lots 16 and 17 block 419; thence
4. North 57 degrees 30 minutes East along last mentioned division line and parallel with Amherst Ave. a distance of 80.0 feet to a point in the Westerly line of Rumson Ave. and the point and place of Beginning



Suzanne Watson
 The Title Company of Jersey
 Caliber Funding LLC
 Its successors and or its assigns

GENERAL NOTES:

Offsets are shown only for checking compliance with deed restrictions and zoning regulations. Offsets shall not be used for any other purposes. Surveyor shall not have any responsibility or liability if the offsets shown are used other than as intended.

This property is subject to any documents of record, either recorded or unrecorded, including mortgages, easements, property line agreements or other conditions unknown to the surveyor are not shown. Surveyor reserves the right to modify this survey should any such information become available.

Surveyor's signature and seal signify that this survey was prepared in accordance with the current regulations enforced by the New Jersey State Board of Professional Engineers and Land Surveyors. Only signed and sealed copies of this survey shall be considered as true copies.

The illustration of riparian claims or regulated wetlands affecting subject property, if any, are not included as a part of surveyor's contract. Surveyor reserves the right to modify this survey should client specifically request these additional services.

This survey has been prepared only for the use of the named parties. Surveyor shall not have any responsibility or liability should this survey be used for resale of property, for use with survey stations, or for use by any other person or entity not specifically named, for any reason other than as intended.

Property is located in a F.E.M.A. FIRM ZONE "A-B"

In consideration of the mutual covenants and promises contained in the agreement between the above named parties and the undersigned, the provisions of which are incorporated herein by reference, I declare that this plan is based on a field survey made on 6/18/13 by me or under my immediate supervision in accordance with N.J.A.C. 13:46-21, and to the best of my professional knowledge, information and belief,

a) correctly represents the conditions found of and on at the date of the field survey; except such easements, if any, below the surface of the lands or on the surface of the lands and not visible,

b) except as shown on the plan, there are no discrepancies between the boundary lines of the subject property as shown on the plan and as described in the legal description of record.

This plan is made to provide information in the title course so that it may bear title to the lands shown herein and for the mortgage holder named above. This declaration is given solely to the above named parties for the transaction only and is not transferable, except as provided herein.

Paul H. Koelling
PAUL H. KOELLING
 LAND SURVEYOR
 PLS: N.J. LICENSE NO. 24GS02177100
 PP: N.J. LICENSE NO. 33JL00200700

SURVEY OF PREMISES

SITUATE IN
 CITY OF MARGATE
 COUNTY OF ATLANTIC, N.J.

BLOCK 419 LOT 17

PAUL H. KOELLING & ASSOCIATES, LLC
 SURVEYING - PLANNING
 2161 SHORE ROAD
 LINWOOD, NJ 08221
 phone (609) 927-0279 fax (609) 927-0188
 CERTIFICATE OF AUTHORIZATION #24GA28133100

Date: JUNE 17, 2013 by: JOKALJA-1
 Scale: 1" = 15' Project No. 14573

ELEVATION CERTIFICATE

OMB No. 1660-0008
Expires March 31, 2012

Important: Read the instructions on pages 1-9.

SECTION A - PROPERTY INFORMATION

A1. Building Owner's Name <u>Suzanne Watson</u>		Form Insurance Company Use
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <u>210 N. Rumson Ave.</u>		Policy Number
City <u>MARGATE</u> State <u>NJ</u> ZIP Code <u>08402</u>		Company NAIC Number
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) <u>Block 419 lot 17</u>		
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>Residential</u>		
A5. Latitude/Longitude: Lat. <u>N 39.3282</u> Long. <u>W 074.5114</u>		Horizontal Datum: <input type="checkbox"/> NAD 1927 <input checked="" type="checkbox"/> NAD 1983
A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.		
A7. Building Diagram Number <u>3</u>		
A8. For a building with a crawlspace or enclosure(s):		A9. For a building with an attached garage:
a) Square footage of crawlspace or enclosure(s) <u>900</u> sq ft		a) Square footage of attached garage <u>280</u> sq ft
b) No. of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade <u>0</u>		b) No. of permanent flood openings in the attached garage within 1.0 foot above adjacent grade <u>0</u>
c) Total net area of flood openings in A8.b <u>0</u> sq in		c) Total net area of flood openings in A9.b <u>0</u> sq in
d) Engineered flood openings? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		d) Engineered flood openings? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number City of Margate <u>345304</u>		B2. County Name <u>Atlantic</u>		B3. State <u>NJ</u>	
B4. Map/Panel Number <u>345304 / 0001</u>	B5. Suffix <u>C</u>	B6. FIRM Index Date <u>No Index Printed</u>	B7. FIRM Panel Effective/Revised Date <u>10/18/83</u>	B8. Flood Zone(s) <u>A8</u>	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) <u>10.0</u>
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9. <input type="checkbox"/> FIS Profile <input checked="" type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other (Describe) _____					
B11. Indicate elevation datum used for BFE in Item B9: <input checked="" type="checkbox"/> NGVD 1929 <input type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other (Describe) _____					
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Designation Date _____ <input type="checkbox"/> CBRS <input type="checkbox"/> OPA					

SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

C1. Building elevations are based on: Construction Drawings* Building Under Construction* Finished Construction
*A new Elevation Certificate will be required when construction of the building is complete.

C2. Elevations - Zones A1-A30, AE, AH, A (with BFE), VE, V1-V30, V (with BFE), AR, AR/A, AR/AE, AR/A1-A30, AR/AH, AR/AO. Complete Items C2.a-h below according to the building diagram specified in Item A7. Use the same datum as the BFE.
Benchmark Utilized n/a Vertical Datum NGVD29
Conversion/Comments _____

		Check the measurement used.
a) Top of bottom floor (including basement, crawlspace, or enclosure floor) <u>7.6</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)	
b) Top of the next higher floor <u>8.2</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)	
c) Bottom of the lowest horizontal structural member (V Zones only) <u>n/a</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)	
d) Attached garage (top of slab) <u>7.8</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)	
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments) <u>8.4</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)	
f) Lowest adjacent (finished) grade next to building (LAG) <u>7.6</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)	
g) Highest adjacent (finished) grade next to building (HAG) <u>8.1</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)	
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support <u>n/a</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)	

SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION

This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law to certify elevation information. I certify that the information on this Certificate represents my best efforts to interpret the data available. I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001.

Check here if comments are provided on back of form. Were latitude and longitude in Section A provided by a licensed land surveyor? Yes No

Certifier's Name <u>Paul H. Koelling, PLS</u>	License Number <u>NJ 24GS 02177100</u>
Title <u>Licensed Land Surveyor</u>	Company Name <u>PAUL H. KOELLING & ASSOCIATES, LLC</u>
Address <u>2161 Shore Road</u>	City <u>Linwood</u> State <u>NJ</u> ZIP Code <u>08221</u>
Signature <u>Paul H. Koelling</u>	Date <u>6/20/13</u> Telephone <u>(609)927-0279</u>

PLACE
SEAL
HERE

IMPORTANT: In these spaces, copy the corresponding information from Section A.

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.
210 N. Rumson Ave.
City Margate State NJ ZIP Code 08402

Insurance Company/Use
Policy Number
Company NAIC Number

SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)

Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.

Comments C2e= Air unit, furnace and hot water heater elevation, dwell has air vents (not Flood vents)

Signature PHK

Date 6/20/13

Check here if attachments

SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)

For Zones AO and A (without BFE), complete Items E1-E5. If the Certificate is intended to support a LOMA or LOMR-F request, complete Sections A, B, and C. For Items E1-E4, use natural grade, if available. Check the measurement used. In Puerto Rico only, enter meters.

- E1. Provide elevation information for the following and check the appropriate boxes to show whether the elevation is above or below the highest adjacent grade (HAG) and the lowest adjacent grade (LAG).
 - a) Top of bottom floor (including basement, crawlspace, or enclosure) is _____ feet meters above or below the HAG.
 - b) Top of bottom floor (including basement, crawlspace, or enclosure) is _____ feet meters above or below the LAG.
- E2. For Building Diagrams 6-9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 8-9 of Instructions), the next higher floor (elevation C2.b in the diagrams) of the building is _____ feet meters above or below the HAG.
- E3. Attached garage (top of slab) is _____ feet meters above or below the HAG.
- E4. Top of platform of machinery and/or equipment servicing the building is _____ feet meters above or below the HAG.
- E5. Zone AO only: If no flood depth number is available, is the top of the bottom floor elevated in accordance with the community's floodplain management ordinance? Yes No Unknown. The local official must certify this information in Section G.

SECTION F - PROPERTY OWNER (OR OWNER'S REPRESENTATIVE) CERTIFICATION

The property owner or owner's authorized representative who completes Sections A, B, and E for Zone A (without a FEMA-issued or community-issued BFE) or Zone AO must sign here. The statements in Sections A, B, and E are correct to the best of my knowledge.

Property Owner's or Owner's Authorized Representative's Name

Address _____ City _____ State _____ ZIP Code _____

Signature _____ Date _____ Telephone _____

Comments

Check here if attachments

SECTION G - COMMUNITY INFORMATION (OPTIONAL)

The local official who is authorized by law or ordinance to administer the community's floodplain management ordinance can complete Sections A, B, C (or E), and G of this Elevation Certificate. Complete the applicable item(s) and sign below. Check the measurement used in Items G8 and G9.

- G1. The information in Section C was taken from other documentation that has been signed and sealed by a licensed surveyor, engineer, or architect who is authorized by law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area below.)
- G2. A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.
- G3. The following information (Items G4-G9) is provided for community floodplain management purposes.

G4. Permit Number	G5. Date Permit Issued	G6. Date Certificate Of Compliance/Occupancy Issued
-------------------	------------------------	---

- G7. This permit has been issued for: New Construction Substantial Improvement
- G8. Elevation of as-built lowest floor (including basement) of the building: _____ feet meters (PR) Datum _____
- G9. BFE or (in Zone AO) depth of flooding at the building site: _____ feet meters (PR) Datum _____
- G10. Community's design flood elevation _____ feet meters (PR) Datum _____

Local Official's Name _____ Title _____

Community Name _____ Telephone _____

Signature _____ Date _____

Comments

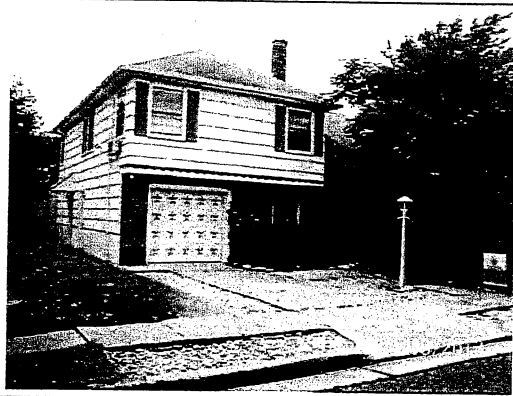
Check here if attachments

Building Photographs

See Instructions for Item A6.

Building Street Address (including Apt., Unit, Suite, and/or Bldg.) No. or P.O. Route and Box No. 210 N. Rumson Ave.			For Insurance Company Use:
City Margate			Policy Number
State NJ	ZIP Code 08402	Company NAIC Number	

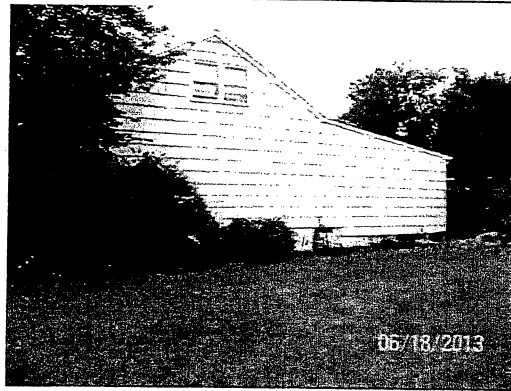
If using the Elevation Certificate to obtain NFIP flood insurance, affix at least two building photographs below according to the instructions for Item A6. Identify all photographs with: date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." If submitting more photographs than will fit on this page, use the Continuation Page on the reverse.



Front View – Date of Photograph: (See Photo Stamp)



Rear View – Date of Photograph: (See Photo Stamp)



Right Side View – Date of Photograph: (See Photo Stamp)



Vent View – Date of Photograph: (See Photo Stamp)

Prepared by:
LEVINE, STALLER, SKLAR,
CHAN & BROWN, P.A.

By: 
BENJAMIN ZELTNER, ESQUIRE

DEED

This Deed is made on July 15, 2013

BETWEEN

MURRAY GEGNER, having an address of 728 Norristown Road, # G110, Lower Gwynedd, PA 19022, referred to as the Grantor

AND

SUZANNE WATSON, having an address of 13 Atrium Court, Northfield, New Jersey 08225, referred to as the Grantee.

The word "Grantee" shall mean all Grantees listed above.

Transfer of Ownership. The Grantor grants and conveys (transfers ownership of) the property described below to the Grantee. This transfer is made for the sum of \$395,000.00.

The Grantor acknowledges receipt of this money.

Tax Map Reference. (N.J.S.A. 46:15-2.1) Municipality of City of Margate City.
Block No. 419, Lot No. 17, Account No. _____.

Property. The property consists of the land and all buildings and structures on the land in the City of Margate City, County of Atlantic and State of New Jersey. The legal description is attached hereto as Exhibit A and made a part hereof.

UNDER AND SUBJECT TO easements, restrictions and agreements of record, if any.

BEING the same land and premises granted and conveyed by Deed from Paul V. Monar and Jeanette A. Monar, husband and wife to Grantor and Mae Gegner, husband and wife, dated October 2, 1954 and recorded October 4, 1954 in Deed Book 1716 Page 25 in the Atlantic County Clerk's Office; by Deed from Grantor and Mae Gegner, husband and wife to Mae Gegner, dated April 3, 1991 and recorded April 16, 1991 in Deed Book 5208 Page 1 in the Atlantic County Clerk's Office; by Deed from Mae Gegner to Grantor and Mae Gegner, husband and wife, dated February 26, 2000 and recorded April 19, 2000 as Instrument No. 0083217 in the Atlantic County Clerk's Office; by Deed from Mae Gegner to Grantor and Mae Gegner, husband and wife, dated February 26, 2000 and recorded April 20, 2000 as Instrument No. 0083349 in the Atlantic County Clerk's Office (duplicate recording). The said Mae Gegner subsequently departed this life on December 27, 2012 whereupon title vested in Grantor by reason of survivorship.

Promises by Grantor. The Grantor promises that the Grantor has done no act to encumber the property. This promise called a "covenant as to grantor's acts" (N.J.S.A. 46:4-6). This promise means that the Grantor has not allowed anyone else to obtain any legal rights which affect the property (such as by making a mortgage or allowing a judgment to be entered against the Grantor).

EXHIBIT A

All that certain lot, tract or parcel of land and premises situate, lying and being in the City of Margate, County of Atlantic, State of New Jersey, bounded and described as follows:

BEGINNING at a point in the westerly line of Rumson Avenue, 146 feet Northwardly of Monmouth Avenue; and extending thence

- (1) Northwardly along the westerly line of Rumson Avenue 54 feet to a point; thence
- (2) Westwardly parallel with Monmouth Avenue 80 feet to a point; thence
- (3) Southwardly parallel with Rumson Avenue 54 feet to a point; thence
- (4) Eastwardly parallel with Monmouth Avenue 80 feet to a point in the westerly line of Rumson Avenue and place of BEGINNING.

FOR INFORMATION ONLY:

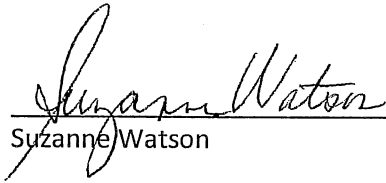
Commonly known as: 210 N. Rumson Avenue
Margate, New Jersey 08402

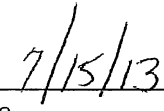
Block 419 Lot 17 City of Margate

End Schedule A Description

RE: 210 N. Rumson Avenue, Margate

Pursuant to this statement, please remit the balance of my additional deposit directly to BK Movers.


Suzanne Watson


Date



State of New Jersey
NONRESIDENT SELLER'S TAX DECLARATION
 (C.55, P.L. 2004) (Please Print or Type)

GIT/REP-1
 (6-10)

SELLER(S) INFORMATION (See Instructions, Page2)

Name(s)

Murray Gegner

Current Resident Address:

Street 728 Norristown Road #G110

City, Town, Post Office Lower Gwynedd Gwynedd State PA Zip Code 19022

PROPERTY INFORMATION (Brief Property Description)

Block(s) 419 Lot(s) 17 Qualifier

Street Address

210 N. Rumson Avenue

City, Town, Post Office

State

Zip Code

Margate City

New Jersey

08402

Seller's Percentage of Ownership

Consideration

Closing Date

100

\$395,000.00

7/15/2013

SELLER(S) DECLARATION

The undersigned understands that this declaration and its contents may be disclosed or provided to the New Jersey Division of Taxation and that any false statement contained herein could be punished by fine, imprisonment, or both. I furthermore declare that I have examined this declaration and, to the best of my knowledge and belief, it is true, correct and complete. By check this box certify that the Power of Attorney to represent the seller(s) has been previously recorded or is being recorded simultaneously with the deed to which this form is attached.

July 15, 2013
 Date

Murray Gegner by his attorney-in-fact Benjamin Zeltner
 Signature(Seller) Please indicate if Power of Attorney or Attorney in Fact

Date

Signature(Seller) Please indicate if Power of Attorney or Attorney in Fact

(Detach on dotted line)

NJ 1040-ES		1 - OFFICIAL USE ONLY		New Jersey Gross Income Tax Declaration of Estimated Tax - VOUCHER	
Calendar Year - Due		YOUR SOCIAL SECURITY NUMBER <u>116-14-9663</u>		SPOUSE SOCIAL SECURITY NUMBER	
LAST NAME, FIRST NAME AND INITIAL Gegner, Murray, Gegner Mae		Be sure to include your social security number on your check or money order to ensure proper credit for this payment			
STREET ADDRESS		Indicate the return for which payment is being made by checking the appropriate box			
CITY, STATE ZIP CODE		N 16 <input type="checkbox"/> NJ-1040NR		F 26 <input type="checkbox"/> NJ-1041	
Make Checks Payable To: State of NJ-Div. of Taxation		AMOUNT OF THIS PAYMENT		\$ <input type="text"/>	

Signatures. The Grantor signs this Deed as of the date at the top of the first page.

Murray Gegner by his attorney-in-
MURRAY GEGNER, by his Attorney-*fact*
in-Fact, BENJAMIN ZELTNER *Benjamin*
Zeltner

STATE OF NEW JERSEY :

SS

COUNTY OF ATLANTIC :

I certify that on July 15, 2013, Benjamin Zeltner, Attorney-in-Fact for Murray Gegner, personally came before me and acknowledged under oath, to my satisfaction, that this person (or if more than one, each person):

- (a) is named in and personally signed this Deed;
- (b) signed, sealed and delivered this Deed as his or her act and deed; and
- (c) made this Deed for \$ 395,000.00 as the full and actual consideration paid or to be paid for the transfer of title. (Such consideration is defined in N.J.S.A. 46:15-5.)

Lillian Elizabeth Felici
Notary Public
LILLIAN ELIZABETH FELICI
A Notary Public of New Jersey
My Commission Expires AUGUST 3, 2017



James W. Manghan, CTA

Office of the Tax Assessor

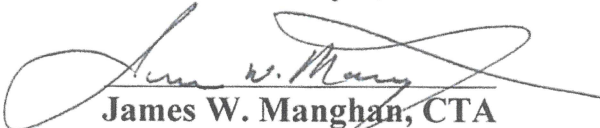
Municipal Building
9001 Winchester Avenue
Margate City, NJ 08402
609-822-1950
609-487-1142 Fax

**Suzanne Watson
210 N Rumson Avenue
Margate, NJ 08402**

Block 419 Lot 17

Location: 210 N Rumson Ave.

Date: February 8, 2021


**James W. Manghan, CTA
Tax Assessor**

Tax list good for 60 days per Margate City Code Book (170-5)

ADJACENT PROPERTY LISTING
 TAXING DISTRICT 16 MARGATE CITY

APPLICANT: 210 N Rumson Avenue
 COUNTY 01 ATLANTIC

PROPERTY ID	PROPERTY LOCATION	CLASS	OWNERS NAME & ADDRESS	
318 1.01	123 N RUMSON AVE	2	FRAZER, ARI & JENNIFER 12 KYNLYN RD WAYNE, PA	19087
319 1	123 N SUMNER AVE	2	IVERSEN, KEN & AMY 15 GREGORY LANE CHESTER SPRINGS, PA	19425
319 13	8804 MONMOUTH AVE	2	URO TRUST, DONNA MARIE 134 STONEGATE DR LANDENBERG, PA	19350
418 1	8802 AMHERST AVE	2	D'ORAZIO, GREGORY J & JOYCE 8802 AMHERST AVENUE MARGATE, NJ	08402
418 2	217 N RUMSON AVE	2	RASHATWAR, SUBASH & SANGEETA 488 KRESSON RD VOORHEES, NJ	08043
418 3	215 N RUMSON AVE	2	FANELLI, DIANE M 354 VANRODEN CIR. HUNTINGDON VALLEY, PA	19006
418 5	213 N RUMSON AVE	2	MULLEN, S G & DOUGHERTY, V J 567 GATES ST PHILADELPHIA, PA	19128
418 6	211 N RUMSON AVE	2	COHEN, JERALD B & BARBARA L 309 FLORENCE AVE N-106 JENKINTOWN, PA	19047
418 7	209 N RUMSON AVE	2	CIVITARESE, EMILY 209 N RUMSON AVE MARGATE, NJ	08402
418 8	207 N RUMSON AVE	2	COADY HOMES LLC 209 VERMONT AVE EGG HARBOR TWP, NJ	08234
418 9	205 N RUMSON AVE	2	YOUNG, GEORGE B, THOMAS & GARY 205 N RUMSON AVE MARGATE, NJ	08402
418 11	201 N RUMSON AVE	2	JANELLI, J J, JANELLI, R A, JANELLI, L M 1420 WOODLINE DR MARYSVILLE, OH	43040
418 12	8800 AMHERST AVE	2	GARBER, TAMI 8800 AMHERST AVENUE MARGATE, NJ	08402
418 14	212 N QUINCY AVE	2	WEINSTOCK, SARAH & ODED 212 N QUINCY AVE MARGATE, NJ	08402

PROPERTY ID	PROPERTY LOCATION	CLASS	OWNERS NAME & ADDRESS	
418 15	210 N QUINCY AVE	2	CORBI, WILLIAM P AND JOANN B 313 THOMAS AVE RIVERTON, NJ	08077
418 17	208 N QUINCY AVE	2	FEE, AGNES S 208 N QUINCY AVE MARGATE, NJ	08402
418 18	206 N QUINCY AVE	2	KRIEGER, SIMIE R 206 N QUINCY AVENUE MARGATE, NJ	08402
418 19	204 N QUINCY AVE	2	RUSSOMANO, SALVATORE J & JOY 204 N QUINCY AVE MARGATE, NJ	08402
418 21	202 N QUINCY AVE	2	PECCHIA, ANTHONY 202 N QUINCY AVE MARGATE, NJ	08402
418 22	200 N QUINCY AVE	2	BAUER, JOHN & VALERIE 5701 HILLCREST PLACE MIDLAND, TX	79707
419 1	8808 AMHERST AVE	2	LUTZER, ANDREW & SAMANTHA 50 MOUNTAIN BROOK DR COLD SPRINGS, NY	10516
419 2	219 N SUMNER AVE	2	STARKWEATHER, SUSANNAH 40 ABERDALE ROAD BALA CYNWYD, PA	19004
419 4	215 N SUMNER AVE	2	FRYE, DIANE B 9614 VENTNOR AVE MARGATE, NJ	08402
419 5	211 N SUMNER AVE	2	KENNEDY, JUDY & JAMES P 5 CASSIN HILL DRIVE GARNET VALLEY, PA	19060
419 7	209 N SUMNER AVE	2	ANDALORO, ANTHONY & HEATHER E KUHARIK 209 N. SUMNER AVE. MARGATE, NJ	08402
419 8	207 N SUMNER AVE	2	DALEY, DANIEL H & TARA L 904 TALLMADGE DRIVE WEST CHESTER, PA	19380
419 9	205 N SUMNER AVE	2	SCIULLI SR, ANTHONY J 205 N SUMNER AVE MARGATE, NJ	08402
419 10	203 N SUMNER AVE	2	SIEGAL, SCOTT 432 BARLOW PLACE BETHESDA, MD	20814

ADJACENT PROPERTY LISTING
 TAXING DISTRICT 16 MARGATE CITY

APPLICANT: 210 N Rumson Avenue
 COUNTY 01 ATLANTIC

PROPERTY ID	PROPERTY LOCATION	CLASS	OWNERS NAME & ADDRESS
419 11	8807 MONMOUTH AVE	2	CONTE, ANGELA & CAMILLE 8807 MONMOUTH AVE MARGATE, NJ 08402
419 12	8804 AMHERST AVE	2	GUIDOTTI, ROBIN A & VALLE, JAMES P 8804 AMHERST AVE MARGATE, NJ 08402
419 13	218 N RUMSON AVE	2	SPERLING, NEIL ALAN & LYNN 218 N RUMSON AVENUE MARGATE, NJ 08402
419 14	216 N RUMSON AVE	2	WEINGART, BRAD S & SHARON HAUSMAN 804 CHAMPLAIN DR VOORHEES, NJ 08043
419 15	214 N RUMSON AVE	2	DEL GUERCIO, EDMUND T & LINDA J 7 FOREST LAKE DRIVE MEDIA, PA 19063
419 16	212 N RUMSON AVE	1	LOFTON, CLAIRE 1859 WYNNEWOOD RD PHILADELPHIA, PA 19151
419 17	210 N RUMSON AVE	2	WATSON, SUZANNE 210 N RUMSON AVE MARGATE, NJ 08402
419 19	208 N RUMSON AVE	2	SOPRANO, KENNETH J & DIANNE R 4068 OAK LANE LAFAYETTE HILL, PA 19444
419 20	206 N RUMSON AVE	2	O'BRIEN, CHRISTOPHER DAVID & LISA K 110 CHINABERRY DR LAFAYETTE HILL, PA 19444
419 21	202 N RUMSON AVE	2	MASSAUX, DONNA & RICHARD 4 SIMSBURY DR VOORHEES, NJ 08043
419 22	8805 MONMOUTH AVE	2	MC GOLDRICK JR, EDWARD F & ET AL 418 WINCANTON PLACE VENICE, FL 34293
420 12	222 N SUMNER AVE	2	HORAN-WHITFIELD, DEENA F 222 N SUMNER AVE MARGATE, NJ 08402
420 13	220 N SUMNER AVE	2	GOODMAN, STEVEN & JANIS 333 DRYDEN ROAD DRESHER, PA 19025
420 14	218 N SUMNER AVE	2	CHARRIEZ, MARIO & KING, MEGAN K 218 N SUMNER AVE MARGATE, NJ 08402

PROPERTY ID	PROPERTY LOCATION	CLASS	OWNERS NAME & ADDRESS
420 15	216 N SUMNER AVE	2	BADUINI TRUST, MICHAEL R & MARYANN 215 LORING COURT SEWELL, NJ 08080
420 16	214 N SUMNER AVE	2	MC CAFFREY, JOSEPH J 214 N SUMNER AVE MARGATE, NJ 08402
420 17	208 N SUMNER AVE	2	SCACCETTI, JANE 2418 NAUDAIN STREET PHILADELPHIA, PA 19146
420 18	206 N SUMNER AVE	2	GLAUSER, LARRY & GLAUSER, DEAN 2316 BENSON STREET PHILADELPHIA, PA 19152
420 19	204 N SUMNER AVE	2	NATALONI, DEBORAH A 204 N SUMNER AVE MARGATE CITY, NJ 08402
420 20	202 N SUMNER AVE	2	LAPINSOHN TRUST, CAROL C@ FREEDE 250 WEST 89TH #9H NEW YORK, NY 10024
420 21	8901 MONMOUTH AVE	2	KEISER, ALAN & SHELBY 325 PENN RD #356 WYNNEWOOD, PA 19096

UTILITIES TO BE NOTIFIED WITH TAXLIST

ATLANTIC CITY ELECTRIC
5100 HARDING HIGHWAY, SUITE 399
MAYS LANDING, NJ 08330

SOUTH JERSEY GAS COMPANY
VP CONSTRUCTION
1 SOUTH JERSEY PLAZA, RT. 54
FOLSOM, NJ 08037

COMCAST CABLE, GREG SMITH, PM
901 LEEDS AVENUE
ABSECON, NJ 08201

ITEMS PRINTED..... 52

45'	80'	41'	80'	41'	80'	41'	80'	41'	80'	41'	80'	41'	80'	41'	80'	41'	80'	41'	80'	41'	80'	41'	80'	41'	80'
12	80'	11	80'	10	80'	9	80'	8	80'	7	80'	6	80'	5	80'	4	80'	3	80'	2	80'	1	80'	1.01	44'
24	80'	23	80'	22	80'	21	80'	20	80'	19	80'	18	80'	17	80'	16	80'	15	80'	14	80'	13	80'	1.02	42'

320

50' AVENUE

45'	80'	41'	80'	41'	80'	41'	80'	41'	80'	41'	80'	41'	80'	41'	80'	41'	80'	41'	80'	41'	80'	41'	80'	41'	80'
12	80'	11	80'	10	80'	9	80'	8	80'	7	80'	6	80'	5	80'	4.02	80'	4.01	80'	1	80'	13	80'	1.01	44'
24	80'	23	80'	22	80'	21	80'	20	80'	19	80'	18	80'	17	80'	16	80'	15	80'	14	80'	13	80'	1.02	42'

319

50' AVENUE

45'	80'	41'	80'	41'	80'	41'	80'	41'	80'	41'	80'	41'	80'	41'	80'	41'	80'	41'	80'	41'	80'	41'	80'	41'	80'
12.02	80'	12.01	80'	10	80'	9	80'	8	80'	7	80'	6	80'	5	80'	4	80'	3	80'	2	80'	1.01	44'	1.01	44'
24	80'	23	80'	22	80'	21	80'	20	80'	19	80'	18	80'	16	80'	15	80'	14	80'	13	80'	1.02	42'	1.02	42'

318

60' AVENUE

45'	80'	41'	80'	41'	80'	41'	80'	41'	80'	41'	80'	41'	80'	41'	80'	41'	80'	41'	80'	41'	80'	41'	80'	41'	80'
12	80'	11	80'	10	80'	9	80'	8	80'	7	80'	6	80'	5	80'	4	80'	3	80'	2	80'	1	80'	1.01	44'
24	80'	23	80'	22	80'	21	80'	20	80'	19	80'	18	80'	16	80'	15	80'	14	80'	13	80'	1.02	42'	1.02	42'

3

74'	80'	36'	80'	36'	80'	36'	80'	36'	80'	36'	80'	36'	80'	36'	80'	36'	80'	36'	80'	36'	80'	36'	80'	36'	80'
10	80'	9	80'	8	80'	7	80'	6	80'	5	80'	4	80'	3	80'	2	80'	1	80'	1.01	80'	1.02	80'	1.03	80'
21	80'	20	80'	19	80'	18	80'	17	80'	16	80'	15	80'	14	80'	13	80'	12	80'	1.01	80'	1.02	80'	1.03	80'

420

50' IHUKLOW

50' SUMNER AVENUE

38'	80'	36'	80'	36'	80'	36'	80'	36'	80'	36'	80'	36'	80'	36'	80'	36'	80'	36'	80'	36'	80'	36'	80'	36'	80'
11	80'	10	80'	9	80'	7	80'	5	80'	4	80'	3	80'	2	80'	1	80'	1.01	80'	1.02	80'	1.03	80'	1.04	80'
22	80'	21	80'	20	80'	19	80'	17	80'	16	80'	15	80'	14	80'	13	80'	12	80'	1.01	80'	1.02	80'	1.03	80'

419

50' RUMSON

56'	80'	54'	80'	36'	80'	36'	80'	36'	80'	36'	80'	36'	80'	36'	80'	36'	80'	36'	80'	36'	80'	36'	80'	36'	80'
11	80'	9	80'	7	80'	5	80'	3	80'	2	80'	1	80'	1.01	80'	1.02	80'	1.03	80'	1.04	80'	1.05	80'	1.06	80'
22	80'	21	80'	19	80'	18	80'	17	80'	15	80'	14	80'	12	80'	1.01	80'	1.02	80'	1.03	80'	1.04	80'	1.05	80'

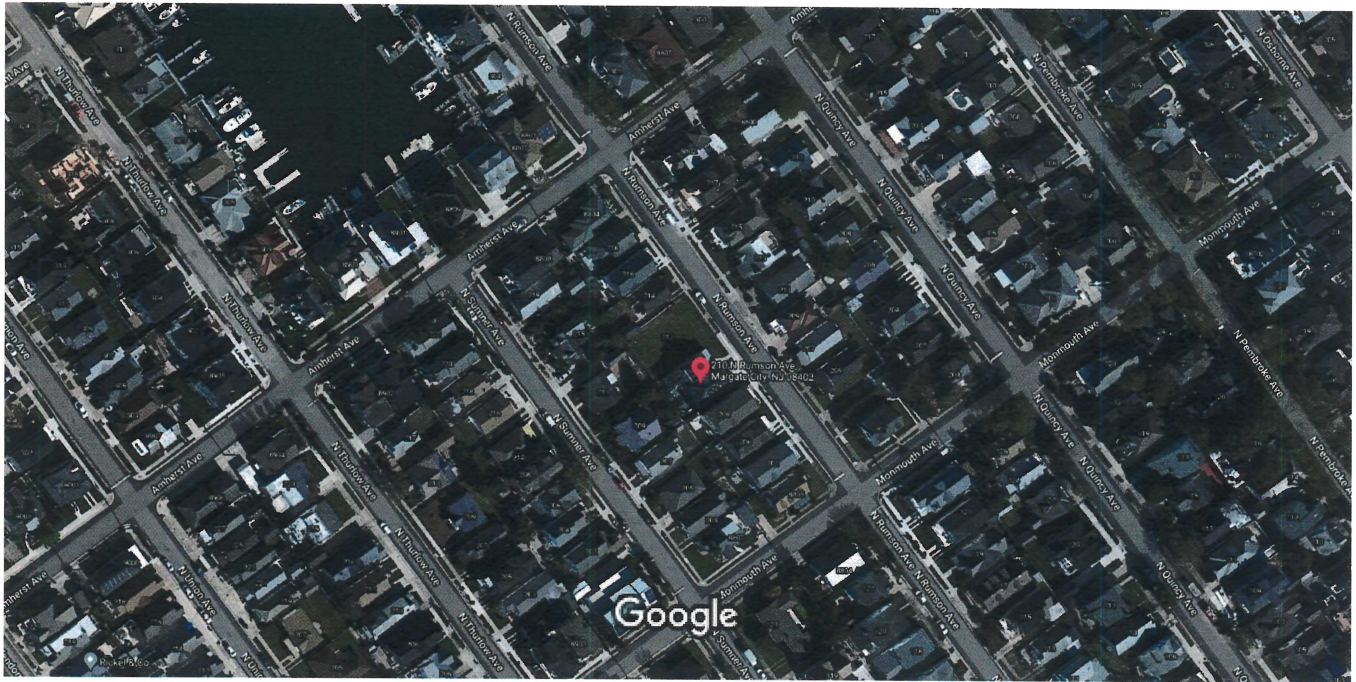
418

60' QUINCY

44'	80'	46'	80'	46'	80'	40'	80'	48'	80'	48'	80'	48'	80'	48'	80'	74'	80'	74'	80'	74'	80'	74'	80'	74'	80'
11	80'	10	80'	9	80'	7	80'	6	80'	4	80'	3	80'	1	80'	1.01	80'	1.02	80'	1.03	80'	1.04	80'	1.05	80'
24	80'	23	80'	21	80'	19	80'	18	80'	17	80'	16	80'	14	80'	13	80'	12	80'	1.01	80'	1.02	80'	1.03	80'

417

Google Maps 210 N Rumson Ave



Imagery ©2021 Maxar Technologies, Map data ©2021 50 ft



210 N Rumson Ave

Margate City, NJ 08402

Building



Directions



Save



Nearby



Send to your phone



Share

Photos



REVENUE and FINANCE DEPARTMENT
Office of the Tax Collector
City of Margate City
9001 Winchester Avenue
Margate City, New Jersey 08402
609-822-2508

Date: 2/4/21

To Whom It May Concern:

I HEREBY CERTIFY THAT the TAX for 1st Qtr 2021

And the WATER & SEWER for 2020

Are paid on property located 210 N Rumson

Assessed to Suzanne Watson

And designated as
BLOCK 419, LOT 17; Tax Map of Margate City, N.J.

Tara J Mazza, CTC
Tax Collector

Per LH