



15 South Pennsylvania Avenue
Atlantic City, NJ 08401

C.R.D.A

MAR 27 2018

APPLICATION FOR CERTIFICATE OF LAND USE COMPLIANCE

(PLEASE PRINT CLEARLY)

Fees: Commercial: \$50.00. Residential: \$32.00*
*Fees in accordance with Resolution 11-60 dated 6/21/11 and Resolution 15-24 dated 3/3/15.
Check or Money Order Payable To "Casino Reinvestment Development Authority". No cash.

BUSINESS NAME: Celebrity Corners, Inc.

Applicant's Name: Domenico Gaggiano Phone: (212) 542-0999

Applicant's Address: 3119 Boardwalk Atlantic City, NJ 08401

Applicant's Email: tropconsultants@aol.com

Applicant's Signature: *D. Gaggiano*

PROPERTY INFORMATION

Street Address: 3119 Boardwalk Atlantic City, NJ 08401 Unit# R-18

Zoning District: _____ Block(s) _____ Lot(s) 19 Condo. Qualifier No. _____

Prior Use (Include total number of units, number of on-site parking spaces, number of units if restaurant and/or bar, describe fully)
Prior use consisted of a boardwalk ramp coming from Montpelier ave to the boardwalk.

Proposed Use (Fully describe proposed use and/or signage, including total number of units, number of on-site parking spaces, number seats if restaurant and/or bar, attach sheets if necessary)
Additional seating, tables, an outdoor bar, patio furniture, couches, signage, etc.

CERTIFICATION IN LIEU OF OATH (OWNER OR AGENT)

Owner Section (To be completed by the owner in fee of the property that is the subject of this application.)

Owner's Name: See Attached Phone: _____

Owner's Address: _____

Owner's Email : _____

I hereby certify that I am the owner in fee of the property that is the subject of this application.

Property Owner's Signature: _____ Date: _____

Agent Section (To be completed if owner in fee has authorized an agent for this application.)

Agent's Name: Domenico Gaggiano

Agent's Title: Business Owner / Operator & License Holder

Agent's Address: 3119 Boardwalk Atlantic City, NJ 08401

Agent's Email: tropconsultants@aol.com

I hereby certify that I have been authorized by the owner in fee to make this application as his/her agent.

Agent's Signature: *D. Gaggiano* Date: 3/26/18

Notes: 1) THIS CERTIFICATION MAY NOT BE THE ONLY APPROVAL REQUIRED NOR DOES IT SUBSTITUTE FOR A CERTIFICATE OF NON-CONFORMITY, BUILDING PERMIT, PERMITS REQUIRED IN FLOOD HAZARD AREAS, MERCANTILE LICENSE, LICENSE TO OCCUPY PUBLIC PROPERTY, LICENSE TO OCCUPY THE PUBLIC RIGHT OF WAY OR OTHER STATE AND LOCAL PERMITS. 2) THE AGENT BY THEIR SIGNATURE REPRESENTS THAT THE PROPERTY OWNER HAS GRANTED CONSENT TO THE AGENT TO SIGN ON THEIR BEHALF. 3) THE CERTIFICATE WILL NOT BE ISSUED IF VIOLATIONS EXIST. 4) THIS CERTIFICATE IS ISSUED BASED ON TRUE AND ACCURATE INFORMATION BEING PROVIDED BY THE APPLICANT AND MAY BE RESCINDED IF IT IS DETERMINED THAT VIOLATIONS EXIST.

FOR OFFICE USE ONLY

Approved _____ Denied _____

Conditions of Approval: Subject to applicant's satisfaction of all applicable requirements of the City of Atlantic City's Land Use Ordinances and regulations and compliance with all Federal, State and Local laws.

Application Number: _____ Fee Received: _____

Date Filed: _____ Date Issued: _____

Authorization: _____

Robert L. Reid, AICP, PP, Land Use Regulation Enforcement Officer

Distribution (City Departments):

Construction Division _____ City Engineer _____ Code Enforcement _____ Fire Department _____
Public Department _____ Mercantile Office _____ Tax Assessor _____ Health Department _____
CDBG Program _____ Other _____