



15 South Pennsylvania Avenue
Atlantic City, NJ 08401

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: La Renaissance Condominium

Applicant's Name: Boardwalk Ventures, LLC Phone: (215) 783-4500

Applicant's Address: 21 N. Haverford Avenue, Margate, NJ 08402

Applicant's Email: dvmerm@yahoo.com

Applicant's Signature: [Signature]

PROPERTY INFORMATION

Street Address: 190 S. Kentucky Avenue, Atlantic City, NJ 08401 Unit# _____

Zoning District: RS-C Block(s) 48 Lot(s) 26 Condo. Qualifier No. _____

Prior Use (include total number of units, number of on-site parking spaces, number of seats if restaurant and /or bar, describe fully.):
48-unit condominium; commercial and office space on first floor; parking garage, pool, and workout space as part of condominium

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.): Same as above

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: La Renaissance Condominium Association, Inc. Phone: (609) 348-5300

c/o William A. Thompson, III

Owner's Address: Callaghan, Thompson, & Thompson P.A., 2428 Atlantic Avenue, Atlantic City, NJ 08401

Owner's Email : watiii@prodigy.net

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

Property Owner's Signature: [Signature] Date: 10/16/19

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

Agent's Name: William A. Thompson, III

Agent's Title: _____

Agent's Address: 2428 Atlantic Avenue, Atlantic City, NJ 08401

Agent's Email: watiii@prodigy.net

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

Agent's Signature: [Signature] Date: 10/16/19

Notice: 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 Code and NJAC 19:66 Land Use Regulations and compliance with all other Federal, State and Local laws.

Application Number: 2019-10-2764

Fee Received: \$50.00 CK# 34263

Date Filed: 10/18/2019

Date Issued: 10/21/19

Authorization: _____

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

Distribution (City Departments):

Construction Division
Police Department
CDBG Program

City Engineer
Mercantile Office
Other

Code Enforcement
Tax Assessor

Casino Reinvestment
Development Authority
APPROVED
Land Use Regulation and
Enforcement Division

Enacted 10/21/2019