

10-06-15 P12:35 IN

APPLICATION FOR CERTIFICATE OF LAND USE COMPLIANCE

Fee: Commercial: \$50.00* Residential: \$32.00* FEES IN ACCORDANCE WITH RESOLUTION 11-50 DATED 5/21/11 AND RESOLUTION 15-24 DATED 3/6/15.	
Chesic or Money Order Payable To "Casino Reinvestment Development Authority" NO CASH	
Applicant's (Your) Name: JAHIRA R RAJPOT Phone: 60 9-513-1416	
Business Name: AC PASHION & MORE	-P
Applicant's (Your) Address: 1639 ATLANTIC AVE, AC STAUDI	U
Applicant's (Your) Email Address: Rakof CASO hatmail com	
Applicant's Signature: Tahira Refaut Date: 9/25/2015	
Owner's Name: Takin & River RAJENT Phone: 609-513-1563	
Owner's Address: 209 Shiresway, EGR Herber TWF, NT 8276	
Owner's Email Address: RAR OCMS @ het mail . com.	
Property Owner's Signed Consent & Law Town apart 9/23/2015	
Name and Address of Professional Consultant(s):	
Street Address of Subject Property: 16 39 Atlantic are Unit# C/c/	
Zoning District: D Block(s) 290 Lot(s) 8 Qualifer No.	
Prior Use (include total number of units, number of seats if restaurant and /or bar, describe fully):	
Store and before that music shep.	
Proposed Use (fully describe proposed use and/or signage, including total number of units; number seats if restaurant and / or bar attach sheets if necessary):	İ
<i>'</i>	.,
RETAIL STORE ON FIRST FLOOR WITH 4'X16	>
SIGN PLAN MUST ACCOMPANY APPLICATION. Rendition of sign with dimensions and square footage of façade of building. Business name and Sign information must match.	≘,
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 owner, by his / her*signed consenty*above, also authorizes the release of the property record cards and any other documents to the applicant. 3) the certificate will not be issued if violations of chapter 163 exist. 4) this certificate is issued based on true and accurate information being provided by the applicant and may be rescinded if it is determined that violations of chapter 163 exist.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.	i
Application Number: 2016-10-1699 Fee Received: (14/2015) Date Filed: 10/17/15	- }
Authorization:	- [
Robert L. Reid, AICP, Dr. Land Use Regulation Enforcement Officer Distribution (City Departments):	
Construction Division City Engineer Code Enforcement Fire Department Casino Reinvestre CDEG Program Other Tax Assessor Health Tepartment Development Aut	
APPROVED	
Larid: Use Regulation	on
Enforcement Div	isi(



CERTIFICATE OF LAND USE COMPLIANCE

FEE: COMMERCIAL \$32.00 RESIDENTIAL: \$16.00
CHECKS OR MONEY ORDER PAYABLE TO CITY OF ATLANTIC CITY T/A Cog ReLab RESIDENTIAL: \$16.00 RESIDENTIAL: \$16.00 RESIDENTIAL: \$16.00
Applicant's (Your) Name: CHILE Colors
Applicant's (Your) Address: 1639 ATLANTIC AVE, ATLANTIC CITY, NJ 08401
Owner's Address: 1639 ATLANTIC AVE, ATLANTIC CITY, NJ 08401
Owner's Signed Consent:
Name and Address of Professional Consultant(s):
Street Address of O. L.
Street Address of Subject Property: 1639 ATLANTIC AVE, ATLANTIC CITY, NJ 08401
Zoning District: CBD Block(s) 990 Lot(s) 8
Present Use (include total number of units, describe fully): EMPTY FORMER MUNSIC STOP
This Application is For (fully describe proposed use and or signage, including total number of units): 161746 ART. COMPUTER HARDWARE AND BOFTWARE SORVICE SECURES.
NOTICE: 1) THIS CERTIFICATION MAY NOT BE THE ONLY APPROVAL REQUIRED NOR DOES IT SUBSTITUTE FOR
I DUILDING PERMIT DEDMITE BUCK HORD IN THE
MERCANTILE LICENSE OR OTHER STATE AND LOCAL PERMITS. 2) THE OWNER, BY HIS "SIGNED CONSENT" ABOVE, ALSO AUTHORIZES THE RELEASE OF THE PROPERTY RECORD CARDS AND ANY OTHER DOCUMENTS TO THE APPLICANT.
TO THE APPLICANT.
FOR OFFICE USE ONLY
APPROVED FOR OFFICE USE ONLY
APPROVED DENIED
Conditions of Approval: Window Signage Shall not exceed
APPROVED DENIED
Conditions of Approval: Window Signage Shall not exceed
Conditions of Approval: Window Signage shall not exceed 33% of the window area. Application Number: (0.000)
Conditions of Approval: window signage shall not exceed 33% of the window area.

CITY OF ATLANTIC CITY

DIVISION OF PLANNING CITY HALL - SUITE 508 ATLANTIC CITY, NEW JERSEY 08401 (609) 347-5404 FAX; (609) 347-5345



Form revised: 5/95

CERTIFICATE OF LAND USE COMPLIANCE

FEE: COMMERCIAL \$32.00 RESIDENTIAL: \$16.00 CHECKS OR MONEY ORDER PAYABLE TO CITY OF ATLANTIC CITY

NOTES: 1) This Certificate does not substitute for a Certificate of NonConformity, Building Permit, Mercantile License or other Federal, State or local permit or approval required. 2) The Cards and any other documents to the Applicant. Cards and any other documents to the Applicant.

TO BE COMPLETED BY THE APPLICANT (Shop) 345-6643
10 BE COMPLETED BY THE APPLICANT (Shop) 545-6648
Applicant's (Your) Name: Michael Shapiro Phone: 609-567-4029
Applicant's (Your) Address: 7423 Doi Lowson Come 111 10
owner a Marile:
Owner's Address: 2423 DRI House Jane Waymoul NJ 08330
Owner's Signed Consent: Takas Ohra Date: 27/21/05
Date.
Name and Address of Professional Consultant(s):
Photo All de
Street Address of Subject Property: 1639 Atlantic Aut., A.C., Mr. 08401
Zoning Classification: C3D Block(s) 135 Lot(s) 45
Present Use (include total number of units, describe fully)
Musical Equipment Sales
This Application is For (fully describe proposed use and as a fully describe proposed use and as a full of the ful
This Application is For (fully describe proposed use and or signage, including total number of units):
FOR OFFICE USE ONLY
APPROVED: DENIED
Conditions of Approval:
Application Number: 97// Fee Received: 3200
Date Filed: 7-31-95 Date Issued: 8-7-95



