PLANNING BOARD, WOOD-RIDGE, NJ
NOTICE OF APPLICATION

REVISED

2023-5eA

Applicant(s): ANTHONY GACCIONE

Trade Name: MY LOVE PETS & GROOMING (TENANT)

Residing at: 90 Carlyle Court (Number & Street) Carlstadt (Town) NJ (State) 07072 (Zip)

Telephone: Anthony Gaccione (352) 650-7879
Email: mylovepetscorp@gmail.com

Hereby applies to the Planning Board per the following decision of the Zoning Official:

335-37 **Site Plan Approval or Waiver required from the Planning Board for any change of tenancy request. Applicant may submit Application for Development requesting waiver of site plan requirements and provide information regarding intended use: including hours of operation, number of employees, and shall submit a parking plan including striping of parking spaces. Notice and publication are NOT required for waiver hearing.**

For the following described property:

253 Valley Boulevard, Wood Ridge (Number & Street) RB (Zoning District)

Borough Tax Map 14 (Lot) 312 (Block)

Zoning Official
Richard Pronti

Denied x Date: 11-13-23

Rev/06/2016

FEE	ESCROW
$400	$1,250

WOOD-RIDGE PLANNING BOARD
Municipal Building
85 Humboldt Street
Wood-Ridge, NJ 07075

APPLICATION FOR DEVELOPMENT

APPLICANT: _____

Property/Street Address	Tax Map Block	Tax Map Lot	Zoning Classification
253 Valley Blvd	312	14	RB

1. Application for:
(Check appropriate boxes) and attach appropriate detail page(s)

	Minor Subdivision Approval
	Preliminary Major Subdivision Approval
	Final Subdivision Approval
	Minor Site Plan Approval
	Preliminary Major Site Plan Approval
	Final Major Site Plan Approval
	Amendment or Revision to an Approved Site Plan
	Conditional Use Approval
	Issuance of a Permit for a structure in bed of a mapped street, public drainage or flood control basin or public area
	Issuance of a permit for a lot lacking street frontage
	Design Waivers
	Variance
	Use Variance
X	Other (specify) Site plan Approval / Waiver

To be completed by Borough Staff only

Date Filed:

No: _____ Application Fee: _____ Escrow Deposit: _____	Scheduled for: Hearing: _____

2. APPLICANT

NAME	Anthony Gaccione
ADDRESS	90 Carlyle ct Carlstadt NJ 07072
TELEPHONE NUMBER	352.650.7879
FORM OF BUSINESS:	Grooming
Individual	
Corporation	S CORP
Partnership	
Limited Liability Company	
Other (Specify)	

3. APPLICANT'S DISCLOSURE STATEMENT
Pursuant to N.J.S. 40:55D-48.1, the names and addresses of all persons owning 10% of the stock in a corporate applicant or 10% interest in any partnership applicant must be disclosed. In accordance with N.J.S. 40-55D-48.2 that disclosure requirement applies to any corporation or partnership which owns more than 10% interest in the applicant followed up the chain of ownership until the names and addresses of the non-corporate stockholders and partners exceeding the 10% ownership criterion have been disclosed. (Attach pages as necessary to fully comply)

NAME	ADDRESS	INTEREST
Anthony Gaccione	90 Carlyle ct Carlstadt	100%

4. APPLICANT'S STANDING Applicant has standing to make this application because:

Applicant has a contract or lease (attach copy)	Application in Hand
Applicant is the owner	
Other (specify)	

lease - waiting on Approval

5. PROPERTY INFORMATION

Owner's Name: Anthony Gaccione

Item Address: 90 Carlyle ct Carlstadt

Telephone No.: 352-650-7879

List all restrictions, covenants, easements, agreements or other items affecting the use of the property.
NONE

Describe the current use of the property.
physical Therapy.

6. TAX COLLECTOR'S CERTIFICAITON

YES NO - Attached is a copy of a Certification from the Tax collector that all taxes due on the subject property have been paid.

7. SUPPORTING DOCUMENTS.

List all Maps, Reports and other materials accompanying the application (attach additional pages as required for complete listing). The documentation must be received by the Board at least ten (10) days prior to the meeting at which the application is to be considered.

Description of Item: Right to Know

See Attached

8. APPLICANT'S CONSULTANTS and REPRESENTATIVES

APPLICANT'S ATTORNEY

NAME	James Novello
ADDRESS	37 Liberty st Little Ferry
CITY, STATE ZIP	N-J 07643
PHONE	201-229-0924
FAX	email JTN.LAW@Comcast.Net

APPLICANT'S ENGINEER

NAME	N/A
ADDRESS	
CITY, STATE ZIP	
PHONE	
FAX	

APPLICANT'S TRAFFIC CONSULTANT

NAME	N/A
ADDRESS	
CITY, STATE ZIP	
PHONE	
FAX	

APPLICANT'S PLANNING CONSULTANT

NAME	~~Ata~~ N/A
ADDRESS	
CITY, STATE ZIP	
PHONE	
FAX	

9. INFORMATION REGARDNG OTHER APPROVALS

Other Agency	Jurisdiction Yes	Jurisdiction No	Date Application Submitted
Wood-Ridge Sewerage Authority		NO	
Bergen County Planning Board		NO	
Bergen County Health Dept.		NO	
BC Soil Conservation District		NO	
NJ Dept. of Environmental Protection ("NJDEP)		NO	
NJDEP Sewer Extension Permit		NO	
NJDEP Stream Encroachment Permit		NO	
NJDEP Wetlands Permit		NO	
NJ Dept. of Transportation		NO	
Other:			

10. NOTICES TO THE PUBLIC Respond to each of the following and attach a copy of the required notice, proof of mailing or proof of publication:

Yes (No)	Are you required to serve notice of public hearing on owners w/in 200 feet of the subject property?
Yes (No)	Are you required to serve notice of public hearing on the Clerk of an adjoining municipality?
Yes (No)	Are you required to serve notice of public hearing on the BC Planning Board?
Yes (No)	Are you required to serve notice of public hearing on any other person entity or governmental agency? Specify:
Yes (No)	Are you required to publish a notice in Wood-Ridge's official newspaper?

SITE PLAN APPLICATION DETAILS

Describe 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)
Grooming - WASH DRY CUT DOG/CAT MAIN

Area to be disturbed (square feet)		
Total number of proposed dwelling units		
Are there any off-tract improvements required or proposed	Yes	No
Any Request for Waiver from Site Plan Design Standard(s)	Yes	No
Does the application require any variances:	Yes	No
Attached is the completed application checklist required by ordinance	Yes	No

For each design waiver required, state (attach additional sheets if needed):

Nature of waiver requested	Code Section affected	Facts supporting grant of waiver.
N/A		

For each variance required, state (attach additional sheets if needed): if this is a use variance, state the proposed use and the reasons supporting grant of the requested use variance including ay special reasons.

Variance type (c1 or c2)	Nature of variance requested	Zoning code section affected	Facts supporting grant of variance.
N/A			

CONDITIONAL USE APPROVAL APPLCATION DETAILS

Describe 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)
Pet Groom ONLY ADDition is ADDing Groomy BATH Tub

List each condition affecting this application by section of Wood-Ridge Zoning Ordinance and describe how this application meets each condition.

Section No.	Description	How application complies

Does the application comply with all conditions set forth in the Wood-Ridge ordinance?	(Yes)	No
Did the Applicant complete the Site Plan Application Detail Sheet	(Yes)	No

APPLICATION WHICH CONTEMPLATES BUILDING OR STRUCTURE NOT ABUTTING A STREET – DETAILS

Does the application contemplate erection of a building or structure on a lot which does not abut a street giving access to the proposed building or structure? Yes (No)

If the answer to the foregoing is in the Affirmative:

Set forth the nature of the building or structure to be erected.


State the practical difficulty, unnecessary hardship or other circumstances which impede the placement of the proposed building or structure or a lot which abuts a street.


State all provisions proposed by the Applicant that will result in adequate access to the property for anticipated uses for firefighting equipment, ambulances and other emergency vehicles.


11. CERTIFICATIONS

APPLICANT

I certify that the statements made and the materials submitted in support of this application for development are true, 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.

I understand that an escrow deposit is required by the Borough of Wood-Ridge to cover the cost of professional services including engineering, planning, legal and other expenses associated with the review of submitted materials and the publication of the decision by the Planning Board. Sums not utilized in the review process shall be returned. I will make the escrow deposit within 15 days of notification of the proper amount. 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 understand that this application will be deemed incomplete unless the initial escrow deposit is made.

Date: 11/29/2023 Anthony Iaccarino

Signature of Applicant

Sworn to and subscribed before me this

29th day of November 2023

Susan Schulz

Notary Public

SUSAN M. SCHULZ
NOTARY PUBLIC OF NEW JERSEY
My Commission Expires 10/24/27

OWNER

I certify that I am the Owner of the property which is the subject of this application, and that I have authorized the applicant to make this application and that I agree to be bound by the application, the representations made and the decision in the same manner as if I were the applicant.

Owen Brian Mac

Signature of Owner

Sworn to and subscribed before me this

28th day of November

Vilma E Gonez

Notary Public

VILMA E GONEZ
NOTARY PUBLIC STATE OF NEW YORK
NEW YORK COUNTY
LIC. # 01GO5083314
COMM. EXP. 10/28/2025

WOOD-RIDGE PLANNING BOARD
BOROUGH OF WOOD-RIDGE
85 HUMBOLDT STREET
WOOD-RIDGE, NJ 07075

CERTIFICATION OF TAX PAYMENTS

ANTHONY GUCCIONE
Name of Applicant

253 Valley BLVD
Street Address

312
Block

14
Lot

I, Kellie Romero, Tax Collector of the Borough of Wood-Ridge, New Jersey, do hereby certify that tax charges on the captioned premise are paid through the current tax period and are not in arrears.

Date: 11/21/23

Kellie Romero
Tax Collector

I verify that this information accurately reflects municipal tax records.

Tax Collector
Wood-Ridge Borough
Bergen County

Planning board of wood ridge

Information of intended use:

253 VALLEY BLVD

1. GROOMING BOUTIQUE RETAIL DOG/CAT GROOMING
   CATS ARE GROOMED FIRST BETWEEN 8-9 1 PER DAY. BY APPOINTMENT ONLY
   WE DON'T GROOM CATS AND DOGS TOGETHER. WE FIND IT BETTER TO KEEP THEM SEPERATED
   DOG GROOMING ON AVERAGE 4 DOGS WILL BE IN THE STORE AT ONE TIME.
2. NO OVER NIGHT BOARDING
3. NO DAY CARE.
4. 6 EMPLOYEES..
   2 COUNTER STAFF./// 1 FULL TIME 1 PART TIME
   4 GROOMING STAFF//// 4 FULL TIME EMPLOYEES
5. OPERATION DAYS/HOURS
   MONDAY-SATURDAY CLOSED SUNDAYS
   8AM-6PM
6. WE INTEND TO USE BACK PARKING LOT FOR DROP OFF AND PICK UP
   WE WILL INSTRUCT ALL CUSTOMERS OUR DROP OFF PICK UP SAFTEY PROCEDURES,
   5 MINUTES DROP OFF ONLY IN IN BACK PARKING LOT
   WE WILL LIMIT STREET PARKING AS BEST WE CAN.
   WE LIKE THIS LOCATION BECAUSE OF BACK PARKING LOT. IT WILL HELP KEEP THE THE CUSTOMERS LOVED ONES SAFE.

7. NOISE. INSIDE THE STORE. WE WILL DOUBLE LAYER 5/8 SHEET ROCK IN GROOMING AREA. WE HAVE DONE THE SAME TO THE STORE IN BELLEVILLE AND HAVE HAD LITTLE TO NON COMPLAINTS ABOUT NOISE FROM THE NEIGHBORING STORES.

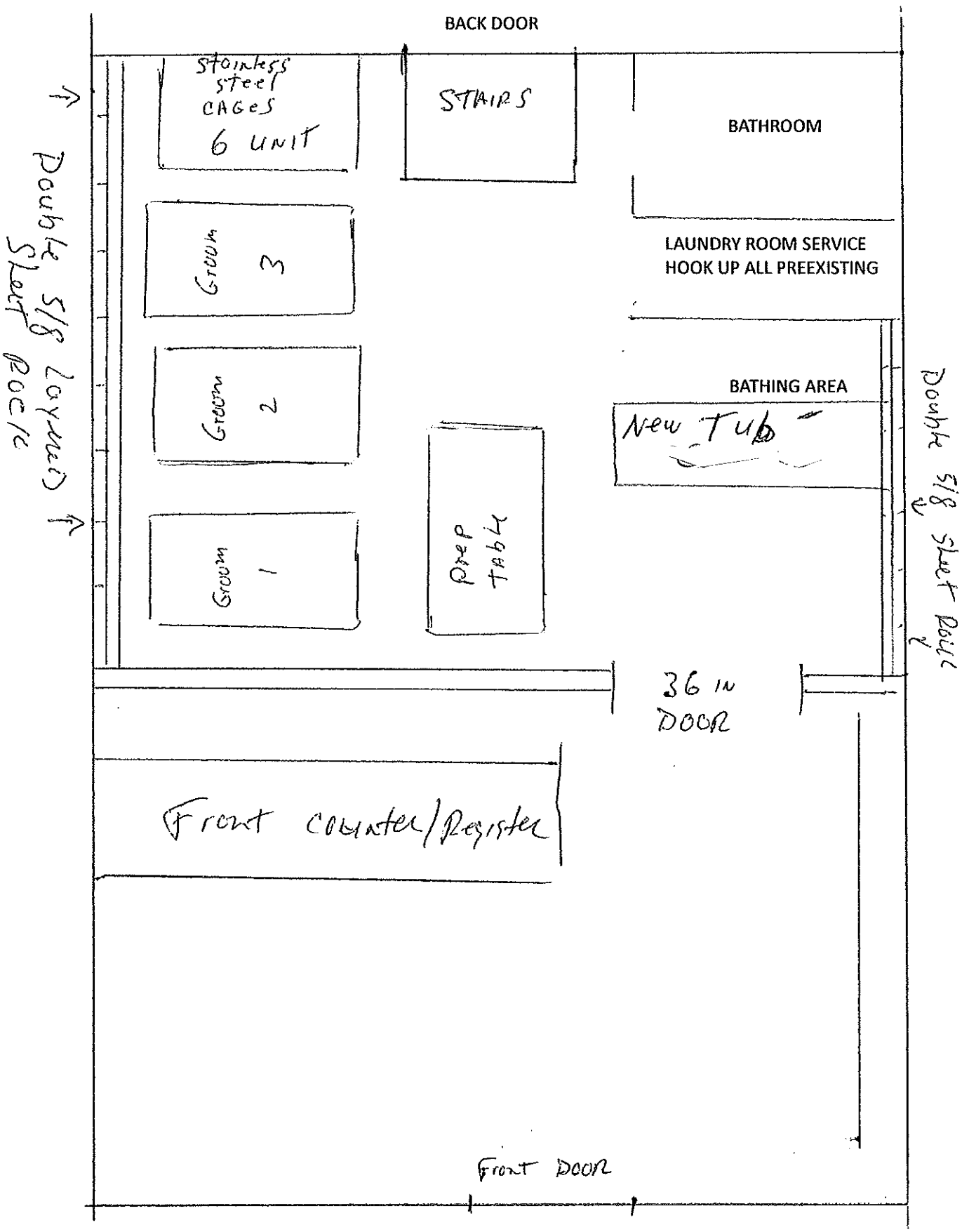
8. WATER . WATER SERVICE DOES NOT NEED TO CHANGE.
   ALL TUBS WILL HAVE HAIR AND DEBRIS SEPERATOR. THIS IS STANDARD PROCEDURE. WE WILL INSTALL NEW 50-75 GAS HOT WATER TANK.

9. 9 CAMERA SERCURITY SYSTEMS. EVERYTHING IS RECORDED IN OUR STORE.
   CUSTOMERS CAN ALWAYS REVIEW DATA UPON REQUEST.

ANTHONY GACCIONE



11/20/2023


BACK DOOR
Stainless steel CAGES 6 UNIT
STAIRS
BATHROOM
LAUNDRY ROOM SERVICE HOOK UP ALL PREEXISTING
Groom 3
Groom 2
Groom 1
Prep Table
BATHING AREA
New Tub
Double 5/8 Sheet Rock
Double 5/8 Layered Sheet Rock
36 IN DOOR
Front counter/Register
FRONT DOOR

PARKING LOT Detail

