

**THE SMOKE RISE CLUB  
ARCHITECTURAL & VARIANCE COMMITTEE  
DECK APPLICATION**

*Please answer all questions. If a question does not apply, please indicate N.A. DO NOT leave any questions blank. Blank applications will not be considered by the A&V Committee.*

**RETURN THIS PAGE WITH ATTACHMENTS**

**DATE:** \_\_\_\_\_

**RESIDENT/OWNER:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**BLOCK NUMBER:** \_\_\_\_\_ **LOT NUMBER:** \_\_\_\_\_

**TELEPHONE NUMBER:** \_\_\_\_\_

**RESIDENT EMAIL:** \_\_\_\_\_

**CHECK LIST:**

1. CERTIFIED SITE SURVEY SHOWING LOCATION OF DECK: \_\_\_\_\_

2. COPY OF CERTIFIED LETTER AND RECEIPTS ATTACHED: \_\_\_\_\_

3. PICTURE/ARCHITECTURAL DRAWING/PHOTO OF NEW DECK SHOWING RAILING, STAIRCASE, ETC. \_\_\_\_\_

4. VARIANCE REQUIRED? DOES THE PLACEMENT OF THE DECK MEET THE CURRENT SMOKE RISE CLUB SETBACK REQUIREMENTS: 50 FEET SIDE AND REAR PROPERTY LINE SET BACK. IF NOT, A VARIANCE WILL BE REQUIRED BY THE BOROUGH OF KINNELON BOARD OF ADJUSTMENT. YES OR NO.

5. DESCRIPTION OF DECKING, COLOR AND MATERIALS:

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**6. CONTRACTOR: NAME, ADDRESS & TELEPHONE NUMBER:**

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**7. EXPECTED START DATE OF CONSTRUCTION:** \_\_\_\_\_

**8. RESIDENT/APPLICANT MUST NOTIFY ALL NEIGHBORS WITHIN 200 FEET OF THE PROPERTY LINES BY CERTIFIED MAIL OF THE PROPOSED PROJECT (COPY OF SURVEY TO SHOW ALL DETAILS AND LOCATION OF PROJECT.).**

**9. BY APPOINTMENT, A MEMBER OF THE SMOKE RISE CLUB ARCHITECTURAL & VARIANCE COMMITTEE WILL CALL AND ARRANGE TO VISIT THE PROJECT SITE. REASON FOR VISIT TO SEE THE ACTUAL CONSTRUCTION SITE AND TAKE A PICTURE(S) OF THE AREA.**

**10. ANY AND ALL EXTERNAL CHANGES IN THE PROJECT MUST BE PROVIDED TO THE AVC FOR APPROVAL. FAILURE TO DO SO WILL RESULT IN A STOP WORK ORDER.**

**OTHER COMMENTS:**

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**OWNER /APPLICANT SIGNATURE:** \_\_\_\_\_