



Township of Evesham.

<https://evesham-nj.org/departments/construction>

984 Tuckerton Road • Marlton • NJ 08053 • 856-983-2900 • Township Code Book: <https://www.ecode360.com/EV0481>

Land Development Application Form

RECEIVED

The application must be filed with the board at least 20-days prior to the hearing date.

Application Fee is Nonrefundable.

JAN 07 2026

Application Fee (94-10): \$250.00
Escrow (initial deposit): \$2,500.00

Date received: _____
PB or ZBA #: Z26-01
HPC App #: _____

If you are not familiar with the [Township Zoning Code \(Ch. 160\)](#), please see the Township Administrative Officer for assistance or visit the Community Development webpage:

<http://www.evesham-nj.org/index.php/forms-comm-dev> or

[Application Checklists: Attachments to Chapter 94 Land Use Regulations](#)

1. SITE INFORMATION

ZONE DISTRICT:

- Property Address: 300 E. Greentree Rd. Unit 10, Marlton, NJ 08053
- Block/s: 8.16 ~~lot~~ Lot/s: 1
- Development Name: Coven Tattoo LLC Home Owners Association: YES NO
- Is the property within the [Pinelands](#). YES NO
- Present Use: T-Mobile Proposed Use: Tattoo Shop
- Proposed Development Name: Coven Tattoo
- Proposed Number of Phases of Construction: _____

2. APPLICANT & OWNER INFORMATION

- Applicant Name: Rachel Friel
- Mailing Address: 20 c village of Stoney Run, Maple Shade, NJ 08052
- Phone #: 609-674-8667 Email: rachel.friel97@gmail.com
- Form of Ownership: Individual Partnership Corporate
 Government Nonprofit Utility

If applicant is not the owner, state applicant's authority to bring this application and specific interest in application (i.e. agent for owner, equitable interest, agreement of sale): _____

- Property Owner Name: Keller, Gerald K + Sharon B
- Property Owner Address: PO Box 2650 Cherry Hill, NJ 08034
- Phone #: 856-751-2990 Email: kellerdevelopment@verizon.net
- Form of Ownership: Individual Partnership Corporate
 Government Nonprofit Utility



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3. APPLICATION TYPE: Check as many items as applicable.

- Bulk Variance/s Use Variance Conditional Use Informal/Concept Review
- Appeal of Decision Site Plan Waiver Interpretation of Zoning Map or Ordinance
- Waiver of Development Standard Submission Waiver Other _____

Subdivision Application:

- Minor Subdivision Major Sub. Preliminary Major Sub. Final
- _____ Total Number of lots to be created _____ Total Proposed Dwellings

Amend Prior Subdivision Approval/s: Please provide copies of the prior resolutions of approval and any supplemental information. _____

Site Plan Application:

- Minor Site Plan Preliminary Major Site Plan Final Major Site Plan

Amend Prior Site Plan Approval/s: Please provide copies of the prior resolutions of approval and any supplemental information. _____

4. ROADWAY JURISIDCTION: NJ State County Route Municipal Road

5. PROPERTY DIMENSIONS:

- a. Total Area in square feet or acres: _____ b. Frontage in feet: _____
- c. Corner property: Yes or No

6.A. SUBDIVISION INFORMATION:

1. Number of proposed lots: _____
2. Average lot size in square feet or acres: _____
Proposed: _____ Required: _____
3. Average Street Frontage: _____
Proposed: _____ Required: _____
4. Will any new streets be created? Yes No
5. Purpose of Subdivision:
Residential Industrial Mixed Use Commercial
Office Agriculture Other (Describe): _____



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7. UTILITIES: (Complete if subdivision and/or site plan are requested)

a. What is the present source of potable water? Well Municipal

b. Is the present water source adequate to service the proposed development? Yes No

c. If the present water source is not adequate, how will the development receive potable water? _____

d. Is municipal water service capacity presently available? Yes No

e. Has application been made for municipal water connection permits? Yes No

If yes, how many _____ and when _____

f. Will an existing well be used? Yes No

g. Are any new wells to be used? Yes No

h. Has the potability of the well water been certified? Yes No

i. Is the property serviced by municipal sewer? Yes No

j. Will the development require additional sewer lines? Yes No

k. Can the existing connection service the development? Yes No

l. Is sewer capacity presently available? Yes No

m. Has application been made for municipal sewer connection permit(s)? Yes No

If yes, how many _____ and when _____

n. Have any municipal water connection permits been obtained? Yes No

If yes, how many _____ and when _____

o. Have any municipal sewer connection permits been obtained? Yes No

p. Is there any existing septic system? Yes No

q. Can the existing septic system service the development? Yes No

r. Is a new septic system proposed? Yes No

If yes, state the type:

Conventional
 Alternative

Waterless toilet w/ gray water
 Other (describe) _____

s. Has application been made for an on-site septic system(s)? Yes No

If yes, how many _____ and when _____

t. Has the application been approved? Yes No

If yes, and when _____

u. Gas: (check)

Natural Proposed Existing
Propane Proposed Existing

Electric: (check)

Above ground Proposed Existing
Below ground Proposed Existing



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9. VARIANCES: Complete for variance applications. **Public Notice (15-16) must be completed by the applicant in compliance with the requirements of the New Jersey Municipal Land Use Law. A copy of the public notice and proof of service are required.**

A. Briefly describe each variance requested and provide Zoning Code Section from which relief is being sought: Code section 160-5B. I am looking to open a tattoo studio and it is not listed in the permitted uses.

B. If a "d" variance is requested, what are the special reason(s) which support your application: (This type of variance can only be heard by the Zoning Board of Adjustment) _____

C. If a "c" variance is requested, what are the exceptional property conditions which prevent you from complying with the zoning ordinance? _____

D. If a "c" variance is requested and you contend there are no exceptional property conditions, how will the Municipal Land Use Act be advanced if the variance were to be granted and how would the benefits of a variance outweigh any detriment? _____

E. Supply a brief statement of facts showing why the requested variance can be granted without substantial detriment to the public good and without substantial impairment to the intent and purpose of the Township's zoning plan and zoning ordinance: My tattoo shop has very little space that is needed for parking. It will bring revenue to the township and expand the art community locally.

10. WAIVERS: (Complete if waiver/s requested) Attach additional pages if necessary.

A. Subdivision or Site Plan Filing: Briefly describe each filing requirement (submission) waiver you are seeking: _____



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B. Subdivision or Site Plan Filing: Briefly describe each Design Standard Waiver you are seeking:

11. INTERPRETATION - APPLICATION: For Zoning Board of Adjustment only.

Attach a statement of contentions and provide Code Section(s) in question.

12. APPEAL DECISION OF ZONING OFFICER OR BUILDING INSPECTOR - APPLICATION:

Attach a statement which includes the following: (1) Description of the order, determination or decision being appealed (hereinafter called "adverse ruling"), (2) Name and Title of enforcing officer, (3) Date adverse ruling was issued, (4) Date applicant received adverse ruling, (5) Why you allege the adverse ruling is in error, (6) The relief you are seeking, and (7) If the adverse ruling is upheld, do you request that a variance be considered?

13. OTHER AGENCIES OR PRIOR APPROVALS REQUIRED:

Agency	Yes or No	Date Submitted
A. <u>Burlington County Planning Board</u>		
B. <u>Burlington County Soil Conservation</u>		
C. <u>Pinelands Commission</u>		
D. <u>NJ Department of Transportation</u>		
E. <u>NJ Department of Environmental Protection</u>		
F. <u>Other: (Describe)</u>		

14. SUBMISSION ITEMS: Plans, surveys, reports, & other items included with application.

Item/Exhibit	Date/Last Revision	Prepared By

15. SUPPLEMENTAL INFORMATION:

A. Have there been any previous applications for this property filed with the Planning Board or Zoning Board?

Planning Board: Yes No Zoning Board: Yes No

If yes, state the nature, date and disposition of each prior application: _____



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B. Describe any deed restrictions affecting the property: _____

C. Describe any proposed deed restrictions: _____

D. Describe any easements or rights of way affecting the property: _____

E. Describe any easements or rights of way proposed by the applicant: _____

16. CORRESPONDENCE: In addition to the applicant, to whom should Township and/or the Board Professional/s correspondence be sent?

Name: _____ Address: _____

Name: _____ Address: _____

Name: _____ Address: _____

17. APPLICANT PROFESSIONAL & EXPERT WITNESS LIST:

A. Name & Profession (Attorney, Engineer, Planner etc): Chris Norman, Esq

Mailing Address: _____

Phone #: (856) 784-8500 Email: cnorman@theplattlawgroup.com

B. Name & Profession (Attorney, Engineer, Planner etc): _____

Mailing Address: _____

Phone #: _____ Email: _____

C. Name & Profession (Attorney, Engineer, Planner etc): _____

Mailing Address: _____

Phone #: _____ Email: _____

D. Name & Profession (Attorney, Engineer, Planner etc): _____

Mailing Address: _____

Phone #: _____ Email: _____



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18. CERTIFICATIONS:

A. TAX COLLECTOR CERTIFICATION (Proof of Payment)

It is hereby certified that all taxes, municipal liens, and utility charges for the address and block and lot below are paid and current as of 1-14-2026

Address: 300 E Greentree Rd. Unit 10, Marlton, NJ 08053

Block/s: 8.16

Lot/s: 1

Property Owner: Keller, Gerald K + Sharon B

Blaine McNally, CTC 1-14-26
Evesham Township Tax Collector Signature and Date
Deputy Tax Collector

B. APPLICANT CERTIFICATION:

The undersigned certify they are the applicant(s) named in the foregoing application or the undersigned certify they are legally authorized to submit the foregoing application and may sign this Certification on behalf of the applicant. The undersigned certify the information stated in the foregoing application and submissions made therewith are true and correct. If any of the foregoing statements are willfully false, the undersigned understand they are subject to punishment.

Rachel Friel 1/7/26
Applicant Signature Date

Print Name: Rachel Friel
Print Title: _____

Applicant Signature Date

Print Name: _____
Print Title: _____

C. OWNER CERTIFICATION:

The undersigned hereby certify that he/she/it/they is/are the owner(s) of the property which is the subject of the foregoing application and that the applicant named therein has been authorized to submit said application to the Planning Board or Zoning Board of Evesham Township. The undersigned certify he/she/it/they is/are said owner(s) or is/are legally authorized to sign this certification on behalf of the owner. The undersigned realize that if any of the foregoing statements are willfully false, he/she/it/they is/are subject to punishment

Wendy K. Schurr, P.O.A. 1/8/2026
Owner Signature Date

Print Name: Wendy K. Schurr
Print Title: Manager

(P.O.A. For Sharon + Gerald Keller)

Owner Signature Date

Print Name: _____
Print Title: _____



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18. CERTIFICATIONS:

A. TAX COLLECTOR CERTIFICATION ([Proof of Payment](#))

It is hereby certified that all taxes, municipal liens, and utility charges for the address and block and lot below are paid and current as of _____.

- Address: 300 E Greentree Rd. Unit 10, Marlton, NJ 08053
- Block/s: 8.16
- Lot/s: 1
- Property Owner: Keller, Gerald K + Sharon B

Evesham Township Tax Collector Signature and Date

B. APPLICANT CERTIFICATION:

The undersigned certify they are the applicant(s) named in the foregoing application or the undersigned certify they are legally authorized to submit the foregoing application and may sign this Certification on behalf of the applicant. The undersigned certify the information stated in the foregoing application and submissions made therewith are true and correct. If any of the foregoing statements are willfully false, the undersigned understand they are subject to punishment.

- | | | | |
|---------------------------------|---------------|---------------------|-------|
| <u>Rachel Friel</u> | <u>1/7/26</u> | _____ | _____ |
| Applicant Signature | Date | Applicant Signature | Date |
| Print Name: <u>Rachel Friel</u> | | Print Name: _____ | |
| Print Title: _____ | | Print Title: _____ | |

C. OWNER CERTIFICATION:

The undersigned hereby certify that he/she/it/they is/are the owner(s) of the property which is the subject of the foregoing application and that the applicant named therein has been authorized to submit said application to the Planning Board or Zoning Board of Evesham Township. The undersigned certify he/she/it/they is/are said owner(s) or is/are legally authorized to sign this certification on behalf of the owner. The undersigned realize that if any of the foregoing statements are willfully false, he/she/it/they is/are subject to punishment

- | | | | |
|--------------------|-------|--------------------|-------|
| _____ | _____ | _____ | _____ |
| Owner Signature | Date | Owner Signature | Date |
| Print Name: _____ | | Print Name: _____ | |
| Print Title: _____ | | Print Title: _____ | |



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CERTIFICATION OF CORPORATE/PARTNERSHIP

To be completed if the applicant is a corporation/partnership and if the application seeks permission to subdivide a parcel of land into six (6) or more lots, or seeks a variance to construct a multiple dwelling of twenty-five (25) or more family units, or seeks site plan approval of a site to be used for commercial purposes in accordance with N.J.S.A. 40:55D-4B.1.

The undersigned hereby certifies that he/she is an authorized representative of the applicant named in the foregoing application and that the applicant is a corporation [] partnership []. The undersigned hereby certifies that the name and address of all shareholders or individual partners owning at least 10% of the stock of the corporation or at least 10% of the interest in the partnership is:

Print Name:

Print Address:

The undersigned realizes that if any of the foregoing statements are willfully false, he/she is subject to punishment.

Signature

Print Name: _____

Print Title: _____

Date: _____

If any of the above owners is a corporation or partnership, the applicant is required to disclose the name and address of each individual holding a 10% interest, or greater, in the named corporation or partnership which shall be divulged in the same format as the above pursuant to N.J.S.A. 40:50D- 48.2). (Attach separate sheet if needed).

This application was prepared by: _____

Print Name



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D. AGREEMENT TO PAY FEES: This agreement, made and entered on 1/7 2026, by and between the Township of Evesham, a Municipal Corporation of the State of New Jersey (hereinafter TOWNSHIP) and Rachel Friel (hereinafter DEVELOPER), is made upon the following terms and conditions.

INFORMATION AND CONTACT/S Entity responsible for escrow-Property Owner or Developer

Project Name: Coven Tattoo Studio
Applicant Name: Rachel Friel Escrow Contact Name: Rachel

Applicant/entity name responsible for the escrow must match the name submitted on the W9

Phone #: 609-674-8667 Email: rachel.friel97@gmail.com

Applicant Mailing Address: 20 C Village of Stony Run, Maple Shade, NJ 08052

Notice: DEVELOPER agrees that all notices or refunds shall be mailed to the following address (note if different to above): _____

1. Agreement to Pay Fees: DEVELOPER hereby covenants and agrees to pay all charges and fees imposed by the TOWNSHIP in connection with the application for development filed contemporaneously herewith. Such fees include, but are not limited to, application fees, attorney review fees, engineer review fees planner review fees, copy costs and postage applicable to this application.

2. Escrow Deposit: TOWNSHIP hereby acknowledges receipt of \$ 2,500.00, said sum being a cash deposit to be placed in a TOWNSHIP trust account to cover the cost of the aforementioned review and inspection fees. Such sum shall be charged periodically as fees and charges accrue and the balance of the escrow sum, if any, after all charges and fees have been paid shall be returned to DEVELOPER.

3. Additional Payments: The DEVELOPER agrees to pay any additional sum required to pay charges and fees not covered by the escrow deposit within fifteen (15) days after the date of receipt of a notice of deficiency by the appropriate Township Office. The DEVELOPER understand and agrees to pay such sum notwithstanding any dispute as to the reasonableness of the fees and charges.

4. Contest of Reasonableness: DEVELOPER agrees that the reasonableness and/or accuracy of any fee or charge may be challenged within seven (7) days of receipt of the professional's billing advice copy and in accordance with the Code of the Township of Evesham. DEVELOPER understands and agrees that the aforesaid procedures shall be the sole and exclusive method of challenging the reasonableness and/or accuracy of charges and fees and hereby waives any longer statue or limitations.

5. Notice: See Developer information and contact/s above

6. Transferability: DEVELOPER understands and agrees that this contract agreement is not transferable, in whole or in part, nor can the DEVELOPER relieve himself/herself from obligation as stated in this contract agreement until such time as said DEVELOPER provides an acceptable dated replacement contract agreement to relieve said DEVELOPER of any further obligation as stated in this contract agreement. This transfer of obligation shall commence on the later of the date of the acceptance by the TOWNSHIP of this replacement contract agreement.

7. Collection: Should the DEVELOPER fail to pay any amount required to be paid hereunder when due, TOWNSHIP shall be entitled to pursue all remedies at law or equity. Interest shall accrue at rate of 18% per annum simple interest on all sums unpaid after the due date. The TOWNSHIP may collect a reasonableness attorney fee which shall not be less than \$300.00 should litigation for the purpose of collecting any sum be commenced.

Rachel Friel

Signed Developer

1/7/26

Date