

Borough of Kenilworth

567 BOULEVARD
KENILWORTH, NEW JERSEY 07033

ZONING PERMIT

APPL. NO: _____

DATE: _____

FEE: _____

BLOCK: _____ LOT: _____

******COMPLETE APPLICATIONS MUST INCLUDE PLANS IN ACCORDANCE WITH THE INSTRUCTION SHEET AND APPLICABLE FEES:**

TYPE OF APPLICATION

- | | |
|---|--|
| <input type="checkbox"/> Minor Residential Alteration | <input type="checkbox"/> Alterations to Multi-Family and/or |
| <input type="checkbox"/> Residential Alteration | <input type="checkbox"/> Non-Residential structures; SIGNS* |
| <input type="checkbox"/> New Single Family Structure | <input type="checkbox"/> New Non-Residential Structure Const. |
| <input type="checkbox"/> New Multi-Family Structure | <input type="checkbox"/> Certificate of Non-Conformity |
| <input type="checkbox"/> New Two Family Structure | <input type="checkbox"/> Change of Occupancy |
| <input type="checkbox"/> Other: Describe _____ | |

***ALL SIGN PROPOSALS REQUIRE THE ADDITIONAL SIGN FORM TO BE COMPLETED AND SUBMITTED WITH THIS FORM.**

PLEASE PRINT

- Applicant's Name: _____ Tel. No. _____
Applicant's Address _____
- Property Owner's Name _____ Tel. No. _____
Property Owner's Address _____
- Location of property for which Zoning Permit is desired: Zone _____
Street Address: _____
- Use of Property: Residential ☐; Commercial ☐; Office ☐; Industrial ☐; Other ☐
Describe present use: _____
Describe proposed use: _____
- Describe proposed construction, alterations, additions or changes at the subject site: _____

- Is a change of occupancy or tenancy involved in this application: Yes ☐ No ☐
If yes, describe _____
- Has the subject premises been the subject of prior application to the Zoning Board of Adjustment or Planning Board to the applicant's knowledge. Yes ☐ No ☐
If yes, state date: _____ Board: _____ Resolution# _____
Disposition of Application: _____

ALL APPLICATIONS MUST BE SIGNED:

Applicant Signature _____

Print Name Applicant _____

Property Owner Signature or Designated Agent _____

Printed Name (Owner) _____

OFFICE USE ONLY:

Based on the information submitted and the requirements of the Borough Zoning Ordinance, your application for a Zoning Permit is hereby: APPROVED _____ DENIED _____
Comments on Decision _____

Zoning Officer

Date

White – Office Yellow – Building Pink – Applicant