



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 Non-Residential structures; SIGNS* |
| <input type="checkbox"/> Residential Alteration | <input type="checkbox"/> New Non-Residential Structure Const. |
| <input type="checkbox"/> New Single-Family Structure | <input type="checkbox"/> Certificate of Non-Conformity |
| <input type="checkbox"/> New Multi-Family Structure | <input type="checkbox"/> Change of Occupancy |
| <input type="checkbox"/> New Two-Family Structure | <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: _____ Block: _____ Lot: _____
- 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: _____
- Do you presently own or have you ever owned property adjacent to the subject site: Yes ☐ No ☐
Describe _____
- Has the subject premises been the subject of prior application to the Zoning Board of Adjustment or Planning Board to the applicants 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 _____ Print Name (Owner) _____

OFFICE USE ONLY:

Based on the information submitted and the requirements of the Township Zoning Ordinance, your application for a Zoning Permit is hereby:

APPROVED _____ DENIED _____

Comments on Decision: _____

Zoning Officer _____ Date _____

Copy 1 (white) Office

Copy 2 (yellow) Code Enforcement

Copy 3 (Pink) Applicant