

ID # _____

ZONING PERMIT APPLICATION

Permit # _____

PLEASE COMPLETE IN FULL - FRONT AND BACK

1. APPLICANT'S NAME _____ PHONE _____
ADDRESS _____ EMAIL ADDRESS _____

NAME AND ADDRESS OF OWNER _____

(If other than applicant) _____

APPLICANT'S SIGNATURE _____ DATE _____

2. NAME OF MUNICIPALITY _____

SITE ADDRESS _____

TAX MAP PARCEL NUMBER _____

EXISTING USE _____ FLOODPLAIN DISTRICT _____

3. TYPE OF USE

A. TYPE OF ACTIVITY

- NEW BUILDING
- ADDITION
- ALTERATION
- RELOCATION
- CHANGE OF USE

B. PROPOSED USE- RESIDENTIAL

- SINGLE FAMILY DWELLING
- MULTI FAMILY (#OF UNITS _____)
- MANUFACTURED HOME
- GARAGE OR CARPORT
- OTHER _____

C. PROPOSED USE- NON-RESIDENTIAL

- COMMERCIAL
- SIGNAGE
- INDUSTRIAL
- INSTITUTIONAL
- RECREATIONAL
- HOME OCCUPATION
- HOME BUSINESS
- OTHER _____

EXPLAIN IN DETAIL, THE PROPOSED WORK TO BE DONE IN ALL USES, USE EXTRA PAPER IF NEEDED. _____

4. STRUCTURAL CHARACTERISTICS AND DIMENSIONS FOR PROPOSED IMPROVEMENTS (PART A-C SHALL BE COMPLETED)

A. BUILDING AND YARD DIMENSIONS(EXTERIOR)

LENGTH AND WIDTH OF STRUCTURE ___ FT x ___ FT TALLEST EXTERIOR POINT ___ FT HEIGHT ___ FT

TOTAL LOT AREA _____ ACRES TOTAL SQ. FT. OF FLOOR AREA _____

FRONT YARD ___ FT (RIGHT-OF-WAY TO BUILDING) LEFT SIDE YARD ___ FT (BUILDING TO PROPERTY LINE)

REAR YARD ___ FT (REAR OF BUILDING TO PROPERTY LINE) RIGHT SIDE YARD ___ FT (BUILDING TO PROPERTY LINE)

B. STRUCTURAL AND SITE INFORMATION

FLOOR PLANS SUBMITTED ___ YES ___ NO # OF STORIES ___ # OF BEDROOMS ___

SQ. FT. OF FINISHED BASEMENT AREA ___ # OF BATHROOMS ___

% OF BASEMENT UNFINISHED ___ GARAGE ___ RECREATION ___

LOT COVERAGE AS IMPERVIOUS PERCENTAGE ___ BUILDING % OF LOT ___ ALL SURFACES % OF LOT

AQUATIC BUFFER MIN 50' ___ WOODLAND BUFFER ___ YES ___ NO DRIVEWAY SLOPE OF ___ %

C. SUPPORT INFORMATION (ATTACHED AS NEEDED)

SEWAGE DISPOSAL ___ WATER SUPPLY ___ FLOODPLAIN CERTIFICATE ___

E&S PLAN (OVER 5,000 SQ. FT) ___ NPDES PERMIT (OVER 1 ACRE) ___ WILL SERVE LETTER ___

OF OFF-STREET PARKING SPACES ___ EXISTING ___ PROPOSED

5. CONSTRUCTION INFORMATION

ESTIMATED COST OF CONSTRUCTION \$ _____

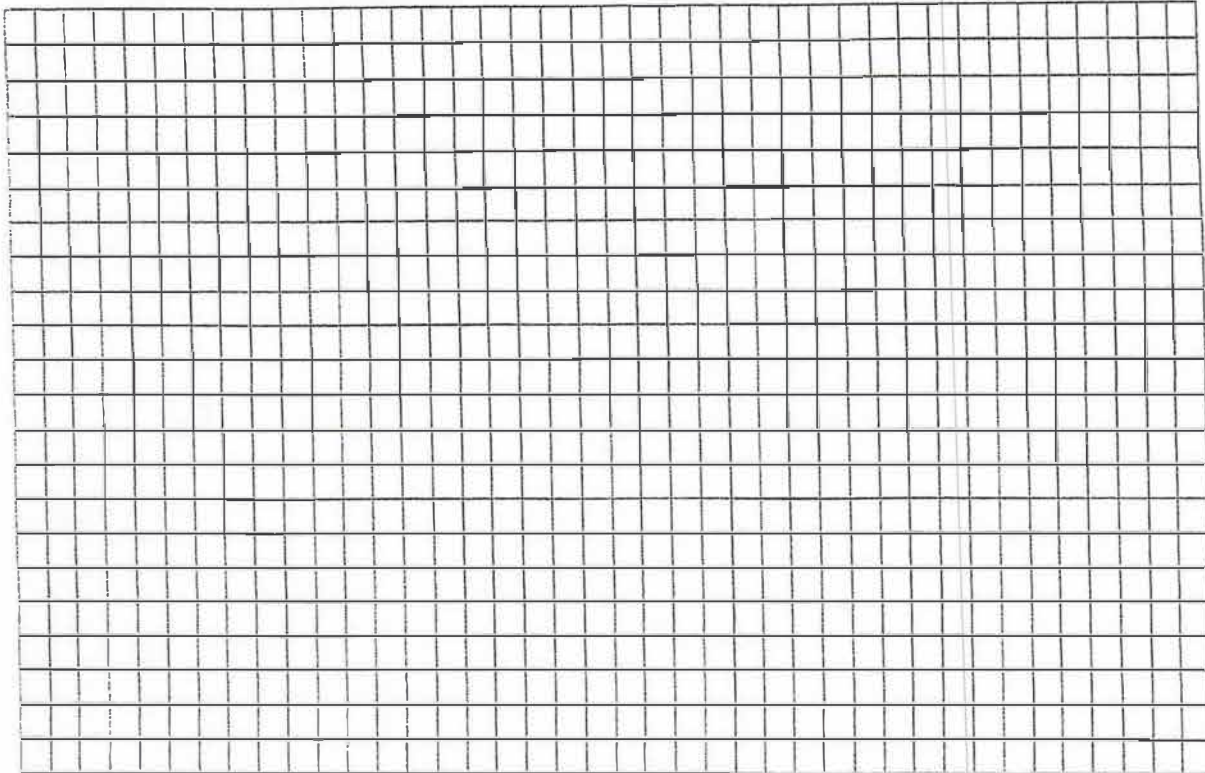
ESTIMATED DATE OF COMPLETION _____

CONTRACTOR NAME _____

PHONE _____

APPLICANT ACKNOWLEDGES ALL INFORMATION IS CORRECT AND ACCURATE TO THE BEST OF THEIR KNOWLEDGE. APPLICANT AGREES NOT TO INITIATE THE PROPOSED PROJECT UNTIL A MUNICIPALITY-ISSUED PERMIT IS OBTAINED. A LOCATION SKETCH SHALL BE DRAWN ON THE OTHER SIDE OF THIS APPLICATION.

LOCATION SKETCH – USE ADDITIONAL PAGES IF NEEDED



INSTRUCTIONS – THE LOCATION SKETCH SHOULD SHOW/NOTE SCALE AND NOTE EXISTING AND PROPOSED ITEMS.

1. The relationship of the lot to adjoin properties and roads (provide route number or name)
2. The location of the building on the parcel, the dimensions of the lot lines, approximate location of well and sewer.
3. The location of any other major lot features: driveways, garage, existing structures, streams, woods, etc....

FOLLOWING SECTIONS TO BE COMPLETED BY ZONING OFFICIAL

APPLICABLE ORDINANCES AND CODES (CHECK APPROPRIATE SPACES)

ZONING CONFORMING___ NONCONFORMING___ SIGN___ TEMPORARY___ SUBDIVISION___ SEWAGE___

FLOODPLAIN_____ DRIVEWAY_____ BUILDING CODE_____ TAX PARCEL NUMBER_____

ZONING DISTRICT_____ OTHER_____

COMMENTS_____

DISPOSITION: ACTION APPROVED___ DISAPPROVED___ PERMIT FEE AMOUNT \$_____

ZONING OFFICIAL_____ DATE OF ISSUANCE_____

REASON FOR DENIAL_____

ZONING HEARING BOARD DATE _____

REQUEST _____

BOARD'S DECISION GRANTED___ DENIED___

ORDER_____ DATE OF ISSUANCE_____

NOTICES: Issuance of this permit may be appealed by any aggrieved party within 30 days of the date of issuance. Completions and submissions of this application shall not relieve the applicant from obtaining such permits as required by other local, county, state or federal regulations or laws. Supplemental forms may be necessary for floodplain management requirements. Structure may be required to be certified prior to occupancy or use. Any change of plans must first be approved by the Zoning Official.