

ZONING PERMIT APPLICATION

Before this application can be accepted to alter, erect, place or use any land in accordance with the building, zoning, land use regulations or a subdivision of the Township of Pennsville, said application must be complete by providing all information requested below. A drawing or current survey showing property lines and **all** buildings located on property with their size. Show location of proposed construction and all set back measurements. (See sample attached) Please type or print all responses. **Completed information will not be processed without the proper fee of \$25.00 and disclaimer form (signed, initialed and dated) accompanying this application. Make checks payable to: The Township of Pennsville.**

Applicant's Name: Phone:
Applicant's Address:
Email Address:
Owner's Name: Phone:
Owner's Address:
Email Address:
Subject Property Street Address: Block(s): Lot(s):
Existing/Prior Use Property/Building: Existing/Prior Commercial Name:
Proposed Use of Property/Building: Proposed Commercial Name:
Please provide the following setbacks of proposed: front yard left side yard right side yard rear yard
Height of Accessory Structure: Are there easements on this property: Yes No
Has the proposed been subject to an application to the Planning Board or Zoning Board of Adjustment? Yes No
Attach a copy of the Board Resolution and signed plans. Approval date: Resolution Number:

TYPE OF ZONING PERMIT APPLICATION

- Addition Carport Change of Use Change of Occupancy Change of Ownership Clothing Bin Deck
- Driveway Dumpster Fence (Pool Yes/No) Garage Handicap Ramp New Dwelling Patio
- Pole Barn Pool/Spa/Hot Tub Porch Sign-Permanent Sign-Temporary Solar-Ground Storage Shed
- Structure-Temporary (no more than 14 days) Structure-Seasonal (no more than 120 days)
- Other

Description of proposal:
Applicant's Signature: _____ Owner's Signature: _____

OFFICIAL USE ONLY

Fee: _____ Check/M.O.#: _____ Received by: _____ Date: _____

Approved Denied Date: _____ Reason for denial: _____

Conditions/Comments: _____

Zoning Officer's Signature: _____ Date: _____