

APPLICATION FOR ZONING PERMIT \$25.00

DATE _____ ZONE _____ BLOCK _____ LOT _____

WORK SITE LOCATION _____

OWNER'S NAME _____

OWNER'S ADDRESS _____

DAYTIME PHONE _____ OTHER PHONE _____

EXISTING USE: _____

PROPOSED USE: _____

THIS APPLICATION MUST BE ACCOMPANIED WITH A COPY OF A RECENT SURVEY OF THE PROPERTY AND A CHECK OR EXACT CASH MADE OUT TO DELRAN TOWNSHIP IN THE AMOUNT OF \$25.00.

OWNER OR AUTHORIZE AGENT: I HEREBY CERTIFY THAT THE PROPOSED WORK IS AUTHORIZED BY THE OWNER OF RECORD AND THAT I HAVE BEEN AUTHORIZED BY THE OWNER TO MAKE THIS APPLICATION AS HIS/HER AGENT. I FURTHER AGREE TO COMPLY WITH ALL ZONING AND BUILDING REGULATIONS OF THIS JURISDICTION.

HOMEOWNER'S ASSOCIATION (HOA) APPROVAL YES _____ NO _____

NAME (PRINT OR TYPE) _____ ADDRESS _____

SIGNATURE – OWNER OR CONTRACTOR

1. ACCESSORY STRUCTURE, SHEDS AND DECKS:

PROPOSED SETBACK: SIDE YARD - RIGHT _____ LEFT _____ REAR _____

PROPOSED HEIGHT: SIDEWALL _____ PEAK _____

REAR YARD AREA _____ SHED AREA _____

TOTAL SQ. FT. OF ALL EXISTING STRUCTURES _____

Sheds shall be permitted only in the rear yard. Sheds on corner lots shall be no closer to a street than the setback for the principal building.

**SHED SETBACKS: A-1 Zone - 10' from any lot line
 R-1 & R-2 Zone – 8' from any lot line**

2. POOLS:

TYPE OF POOL: _____ IN GROUND _____ ABOVE GROUND _____

PROPOSED SETBACK: SIDE YARD _____ REAR YARD _____

DISTANCE TO NEAREST BUILDING FOUNDATION: _____

POOL BARRIER: _____ TYPE _____ HEIGHT: _____

3. FENCES:

TYPE _____ HEIGHT _____

4. OTHER:

SIGN: _____

EXISTING BUILDING AREA: _____

PROPOSED ADDITION AREA: _____

EXISTING PAVED AREA: _____

PROPOSED PAVED AREA: _____

PROPOSED HEIGHT OF STRUCTURE: _____

PROPOSED SETBACKS: FRONT _____ SIDE _____ REAR _____

5. TEMPORARY OUTDOOR DINING: NO FEE IS REQUIRED

PROPOSED AREA: _____
(Please attached sketch including total number of tables)

THIS APPLICATION IS HEREBY APPROVED _____ DENIED _____

REFERRAL: COUNCIL _____ PLANNING _____ ZONING _____

Zoning Control# _____ Rec'd: cash/check _____ voucher# _____ Constr. Control# _____

ZONING OFFICER

DATE

COMMENTS: