

HAZLET TOWNSHIP
1766 UNION AVENUE, HAZLET, NJ 07730
(732) 264-1700, FAX (732) 264-0659

Application for Zoning Permit

Date: _____

Application No. _____

Permit No. _____

Application is hereby made for a Zoning Permit in conformity with the requirements of the Zoning Ordinance of the Township of Hazlet and any amendments thereto for the following described work:

Property Owner Name: _____

Property Address: _____

Block: _____ Lot: _____ Zone: _____

The above name applicant hereby applies for a Zoning Permit

to: _____

<u>Size of Property</u>	<u>Principal Building</u>	<u>Accessory Building/Structure(s)</u>
Area _____ Sq.Ft.	Type _____	Total Area _____ Sq.Ft.
Frontage _____ Sq.Ft.	Gross Floor Area _____ Sq.Ft.	Min. Side Yard _____ Ft.
Depth _____ Ft.	Lot Coverage _____ %	Min. Rear Yard _____ Ft.
	Bldg Ht _____ Ft (Max)	Min. Distance _____ Ft. (From Dwelling)
Signs: Type _____	Area Permitted _____	Area Requested _____ Ft.

Submitted herewith is a Certified Survey of the lot showing proposed work,
all existing structures and applicable building plans.

Owner: _____ Address: _____ Phone: _____

Contractor: _____ Address: _____ Phone: _____

Estimated Cost of Work: \$ _____

Signature of Applicant or Agent

Zoning Permit Fee \$ _____

Sharon A. Keegan, Zoning Officer
(732) 264-1700 X 8656