

Call 732-264-1700 ext. 8659 to set up date for Inspection

**HAZLET TOWNSHIP**

**APPLICATION FOR A ZONING PERMIT FOR FENCING**

DATE: \_\_\_\_\_

APPLICATION NUMBER: \_\_\_\_\_

PERMIT NUMBER: \_\_\_\_\_

Application is hereby made for a Zoning Permit in conformity with the requirements of the Development Review Ordinance No: 408.07 of the Township of Hazlet and any amendments thereto for the following described work.

NAME: \_\_\_\_\_  
(If Commercial or Industrial Property give name of store or company)

WORK ADDRESS: \_\_\_\_\_

BLOCK: \_\_\_\_\_ LOT: \_\_\_\_\_ ZONE: \_\_\_\_\_

The above named applicant hereby applies for a Zoning Permit to erect: (state height & type of fence)

\_\_\_\_\_

The following regulations shall govern the issuance of this permit:

- \_\_\_\_\_ 1. Fence may not exceed the height applied for.
- \_\_\_\_\_ 2. Supporting members of the fence must face the property upon which it is situated.
- \_\_\_\_\_ 3. All fences shall be constructed so that the finished side faces the abutting property
- \_\_\_\_\_ 4. Fence must be totally erected inside the property line of this lot.
- \_\_\_\_\_ 5. All existing fence shall be removed before erecting a new fence in that location
- \_\_\_\_\_ 5. Fence must remain open (*minimum of 50% of the fence must not contain any material*).  
(Applicable only of initialed by the Zoning Officer)
- \_\_\_\_\_ 6. Applicant is responsible for maintenance between adjoining property fences.  
(Applicable only if initialed by the Zoning Officer)
- \_\_\_\_\_ 7. Chain link fence permitted, however no screening may be installed.  
(Applicable only if initialed by the Zoning Officer)
- \_\_\_\_\_ 8. Erection of fencing through and/or on any easement is at the homeowner's risk. The homeowner has been made aware that access to the particular easement is reserved by the owner of the easement and removal and replacement of the fence at the property owner's expense may be required.

Submitted herewith is a property survey of the lot showing the proposed work and/or existing structure(s).

Owner \_\_\_\_\_ Address \_\_\_\_\_ Phone \_\_\_\_\_

Contractor \_\_\_\_\_ Address \_\_\_\_\_ Phone \_\_\_\_\_

Estimated cost of work \$ \_\_\_\_\_

Zoning Permit Fee \$45.00

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Sharon A. Keegan, Zoning Officer