

Hazlet Township, New Jersey
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:

Name:

Address:

Block: Lot:Zone:.....

The above named applicant hereby applies for a Zoning Permit to:

.....

.....

Fill in the following items that apply to the property in question.

<u>Size of Property</u>	<u>Principal Building</u>	<u>Accessory Building/Structure (s)</u>
Area Sq.Ft.	Type	Total AreaSq.Ft.
FrontageFt.	Gross Floor AreaSq.Ft.	Min. Side YardFt.
DepthFt.	Lot Coverage %	Min. Rear YardFt.
	BLDG. HT.Ft. (Max)	Min. distanceFt. (from dwelling)

Signs: TypeArea PermittedArea RequestedFt.
Yard Dimensions (Not Required for Signs)

FrontFt. Right SideFt. Left SideFt. RearFt.

Submitted herewith is a dimensioned plan (Certified Survey) of the lot showing proposed work and/or existing structure(s).

OwnerAddress.....Phone.....

LesseeAddress.....Phone.....

ContractorAddress.....Phone.....

Est. Cost of Work \$.....

.....
Signature of Applicant or Agent

Zoning Permit Fee \$.....

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Sharon A. Keegan/Zoning Officer

Please note: New Procedure: Lot Grading & Elevation Plan prior to the issuance of zoning permit.

