

# Borough of Elmer

## HOUSING, ZONING, & PROPERTY MAINTENANCE OFFICE

120 S. Main Street, PO Box 882, Elmer, NJ 08318

(856) 358-4010 Ext. 114 (856) 358-4870 fax zoninghousing@elmerboroughnj.com www.elmerboroughnj.com

### APPLICATION FOR ZONING PERMIT

**Instructions:** This application shall include a **PLOT PLAN** or NJ licensed land **SURVEY** if available, clearly detailed and showing all **existing** and **proposed** structures with dimensions, setbacks, and recorded easements. In certain situations a NJ licensed land survey may be required.

Site Address: \_\_\_\_\_ Block # \_\_\_\_\_ Lot # \_\_\_\_\_

Property Owner: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

I \_\_\_\_\_, owner or authorized agent for owner, give permission for proposed applicant/contractor to seek approvals or building permits if needed.

Applicant/Contractor: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

Home Improvement Contractor Registration #13VH: \_\_\_\_\_

**Proposed Activity/Construction** (attach a plot plan/survey showing all existing buildings and proposed construction with measurements): \_\_\_\_\_

#### Proposed Setbacks from Property Line:

FRONT \_\_\_\_\_ REAR \_\_\_\_\_ RIGHT \_\_\_\_\_ LEFT \_\_\_\_\_ HEIGHT \_\_\_\_\_

**Shed/Garage/Other Building:** Width \_\_\_\_\_ Length \_\_\_\_\_ Height \_\_\_\_\_

**Addition/Deck:** Width \_\_\_\_\_ Length \_\_\_\_\_ Height \_\_\_\_\_

**Fence:** Type: \_\_\_\_\_ Height: \_\_\_\_\_ Front: \_\_\_\_\_ Rear: \_\_\_\_\_ Side: \_\_\_\_\_

**Pool:** Above Ground: \_\_\_\_\_ Size: \_\_\_\_\_ Height: \_\_\_\_\_ In Ground: \_\_\_\_\_ Size: \_\_\_\_\_

**New Home/Building:** Width \_\_\_\_\_ Length \_\_\_\_\_ Height \_\_\_\_\_

Property Owner Signature: \_\_\_\_\_ Date: \_\_\_\_\_

All information supplied herein is considered to be material facts, and misrepresentation shall be sufficient cause for denial of this application or revocation of any permit(s) previously issued. Pursuant to NJ State Statute Section 40:55-18 the Zoning Official has ten (10) business days to respond to this application. Zoning applications are non-transferable and are void after 6 months.

**Zoning Permit Fee: \$25**

Make checks payable to: **Borough of Elmer**

#### FOR OFFICE USE ONLY

Fee \_\_\_\_\_ Cash \_\_\_\_\_ Check # \_\_\_\_\_ Approved \_\_\_\_\_ Denied \_\_\_\_\_

Received By \_\_\_\_\_ Date \_\_\_\_\_

App # \_\_\_\_\_

\_\_\_\_\_  
Zoning Officer Date