

Zoning Personnel Use ONLY:
 BLOCK _____ LOT _____
 Date Received _____ Fee _____ Check/Cash _____ Control # _____
 H/O Assoc. Approval _____ Zone _____ Flood Zone _____ Flood Area _____ MUA _____ Taxes _____
 Zoning Official: Approval _____ Denial _____

TOWNSHIP OF OCEAN ZONING APPLICATION ZONING DEPARTMENT

50 RAILROAD AVENUE WARETOWN, NJ 08758 PHONE: 609-693-3487 FAX: 609-693-0478

PLEASE NOTE, A SURVEY SHOWING ALL PROPOSED CHANGES MUST BE SUBMITTED WITH EVERY APPLICATION

BLOCK _____ LOT _____

NAME OF APPLICANT: _____ TELEPHONE#: _____
 IF WORK BEING DONE BY HOMEOWNER, ENTER H/O'S INFORMATION. MUST BE OWNER OF RECORD.

ADDRESS OF APPLICANT: _____

ADDRESS OF PREMISES FOR WHICH ZONING PERMIT IS DESIRED: _____

NAME & TELEPHONE NUMBER OF CONTRACTOR RESPONSIBLE FOR WORK: _____

NAME & TELEPHONE NUMBER OF RESPONSIBLE PARTY TO ANSWER QUESTIONS REGARDING THIS APPLICATION: _____

E-MAIL ADDRESS: _____ FAX# _____

HOUSE/ADDITIONS/DECKS/PATIOS/DRIVEWAYS/WALKWAYS/POOLS: FEES: \$50.00 Dimensions of PROPOSED work:

IF BUILDING, # OF FLOORS, AND USE OF EACH TYPE OF ROOM:

ARCHITECTURAL/CONSTRUCTION PLANS, AND FLOOR PLANS MUST BE SUBMITTED WITH APPLICATION

Description of the project and/or Occupancy:

Are any trees being removed as a result of this application? (Circle One) YES NO

IF YES, TREE REMOVAL PERMIT WILL BE REQUIRED, ALONG WITH A PHOTO OF PROPOSED TREES TO REMOVE.

ATTACH SQUARE FOOTAGE OF SIGN, PLANS, ELEVATION DRAWINGS AND TO SCALE SURVEY INFORMATION TO APPLICATION

Lot Size in Square Footage _____ Required Environmental Commission Approval _____

PLEASE NOTE: PERMIT EXPIRES 90 DAYS FROM DATE OF ISSUE

Is this an UPDATE to a previously submitted application? (Circle One) YES NO

If YES, Zoning Application No. _____

PLEASE ANSWER THE FOLLOWING QUESTIONS

- a. Are you in the Pinelands or have wetlands on your property? If yes, you need a letter from the proper agency showing prior approvals: (Circle One) YES NO
- b. Did you attach Construction Plans or Company Brochure? (Circle One) YES NO
- c. If demolishing an existing Single Family Dwelling and rebuilding or whether building a new single family dwelling on vacant land I understand that all construction of Single Family Dwellings are subject to COAH (Council on Affordable Housing) fees, for which I am responsible. INITIALS _____
- d. Are you part of a Home Owners Association that requires a prior approval? (Circle One) YES NO
- e. Do any easements exist on your property? (circle One) YES NO
If yes what type? _____
- f. Have you submitted (4) surveys TO SCALE, with proposed changes drawn in? YES NO
- g. Did you include a sketch/floor plan, if applicable, for proposed project? YES NO

NOTE: An easement Agreement must be executed if a fence is proposed to be installed within a Township Easement. Attaching to a neighbor's fence requires written permission.

VARIANCE: Approval Date _____ Resolution # _____

This permit applies to the Ocean Township Ordinance only. Other State, County and Federal permits may be required before construction begins.

I hereby certify that I have read the ENTIRE application and understand this form and I am authorized to apply for zoning approval. I am also aware that work must begin within six months of issuance of Zoning Permits and will expire one (1) year from the date of approval and I am responsible to have any and all inspections done when the work is complete. Ord. No. 1982-12, as amended through Ord. No. 1994-13

SIGNATURE _____ DATE _____

❖ Township of Ocean Land Use Ordinance, a Zoning Permit must be obtained prior to the erection, restoration, addition to, or alteration of any structure within the Township of Ocean, as specified in the said Ordinance.