WILLIAMSTOWN

NEW JERSEY

come grow with us!

ZONING PERMIT APPLICATION

* **NO CASH OR CREDIT CARD** *

OFFICE USE ONLY

$20.00 RESIDENTIAL **ZC#**_____

$75.00 NON/RESIDENTIAL

CHECK # _____ DATE:_____

SIGNATURE_____

APPLICANT: _____

BUSINESS NAME:_____

ADDRESS:_____

PHONE: _____

CONTACT: _____

TOTAL SQ. FT. OF BUSINESS: _____

HAVE YOU FILED FOR A ZONING PERMIT FOR THIS LOCATION WITHIN THE PAST (10) TEN YEARS?_____YES_____NO

OWNER OF PROPERTY:_____

ADDRESS:_____

HOME PH #_____WORK PH#_____

EMAIL ADDRESS: _____

WATER AND SEWER: _____YES

SEPTIC: _____ YES

WELL: _____YES

BLOCK_____LOT_____

ADDRESS_____

SUITE/BUILDING #_____

TOTAL SQ. FT. OF HOME: _____

Block: _____ Lot(s)_____

Address: _____

REQUESTED USE:

_____

(INCOMPLETE APPLICATIONS WILL NOT BE PROCESSED) PLEASE PROVIDE THE FOLLOWING INFORMATION):

A. PLOT PLAN OR SURVEY SHOWING EXISTING, PROPOSING BUILDINGS INCLUDING FRONT, SIDE AND REAR SETBACKS. **ALL DOCUMENTS LARGER THAN 11X17 OR GREATER THAN 5 PAGES MUST BE SUBMITTED IN ADOBE PDF FORMAT.**

B. CHECKS MUST BE MADE PAYABLE TO MONROE TOWNSHIP ZONING. **NO CASH.**

C. IF VARIANCES WERE NEEDED, A COPY OF ALL RESOLUTIONS MUST BE SUBMITTED

D. IT IS THE RESPONSIBILITY OF THE PROPERTY OWNER TO OBTAIN ANY CONSTRUCTION PERMIT REQUIRED. YOU MAY CONTACT THE CONSTRUCTION DEPARTMENT AT (856)-728-9800X 222

This document is provided so you can type, print and submit to the zoning department.
WE DO NOT SAVE ANY INFORMATION TO THE WEBSITE.

I HEREBY CERITY THAT I AM THE OWNER AND/OR REPRESTATIVE OF SAID PROPERTY AND ALL STATEMENTS AND DOCUMENTATION ATTACHED THERETO ARE TRUE.

SIGNATURE_____

Monroe Code available at www.monroetownshipnj.org

QUESTIONS: CALL US 856-728-9800 EXT. 289, 271