

Zoning Permit Application

Non-Refundable Application Fee \$25

Property Information

Property Address: _____ Block: _____ Lot: _____ Zone District: _____

Applicant's Information

Name: _____ Phone # _____

Address: _____ E-mail _____

City: _____ State: _____ Zip Code _____

Owner's Information Check here if owner is the applicant, if not complete the section below:

Name: _____ Phone # _____

Address: _____ E-mail _____

City: _____ State: _____ Zip Code _____

Current or Last use of Property

Single Family Two Family Multi-family Townhouse/Condo
 Office Retail Vacant Land Other (describe): _____

Proposed Use of Property

Single Family Two Family Multi-family Townhouse/Condo
 Office Retail Vacant Land Other (describe): _____

Type of Zoning Permit Requested

Interior Modification Alteration Addition Fence Demolition Driveway
 In Ground Pool Above Ground Pool Hot Tub/Spa Deck Patio
 Sign Accessory Structure (shed, detached garage, gazebo, etc.)
 Certification of Non Conforming Use/Structure Certificate of Continued Occupancy
 Temporary Storage Container
 Other (describe): _____

Detailed description of proposed work or use:

1. This application must be accompanied by two copies of an accurate survey (except when applying for a CCO) showing the proposed location of the work, drawn to scale.
2. By signing this application you are certifying that the above stated information is accurate and the survey submitted with this application is a true representation of the property with the exception of any proposed work as part of this application.

Signature of Applicant

Date

For Office Use: Cash Check # _____ Date rec'd: _____

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