



HAINESPORT TOWNSHIP
ONE HAINESPORT CENTRE
PO BOX 477
HAINESPORT, NJ 08036



APPLICATION FOR ZONING PERMIT

Date _____

IS THIS AN UPDATE TO A PREVIOUSLY SUBMITTED APPLICATION _____ YES _____ NO

If yes, Zoning Permit # _____

Block _____ Lot _____ Zone _____

Work Site Location _____

Property Owner _____

Address of Owner _____ Phone # _____

Existing Use _____ Proposed Use _____

Description of Work _____

Contractor Name/Agent _____

Contractor or Agent License # _____

I hereby (contractor / owner) certify that the proposed work is authorized by the owner of record to make this application. (I / We) agree mto conform to all application laws of this jursdiction.

Signature _____ Address _____

Telephone _____ Fax _____

Name of Applicant: _____

Submitted:

- Two Plot Plans showing the existing building(s) and proposed building(s) including the front, side, and rear setbacks.
- One (1) copy of the Home owners Association approval.
- Site Plan Waiver with required Check List.
- Construction Permit

VARIANCE: Approval Date _____

File # _____

Check One: _____ Corner Lot _____ Inside Lot

SETBACKS:

Front _____ Rear _____ Smallest Side _____ Aggregate _____ Second Side _____

Ground Floor Area: Existing _____ Proposed _____ Total _____ Sq. ft.

Sq. Ft. of Lot _____ Percentage of Lot covered by bldg. _____ Height _____

Swimming Pool distance from: Foundation Wall _____ Side _____ Rear _____

Fencing: Type _____ Height _____ Location _____

This application is _____ Approved _____ Denied _____ Denied

Application # _____

Const Control # _____

Kathy Newcomb
Zoning Officer