

App. No. _____

Franklin Township
202 Sidney Road
Pittstown, NJ 08867
908-735-5215 ext. 14
Zoning Office

Zoning Permit Application

Fee: \$35.00

Property Owner Information

Name _____
Address _____
City _____
State _____ Zip _____
Phone _____ Fax _____
Email _____
Note: Owner's signature is required in order for application to be approved.

Contractor Information

Name _____
Address _____
City _____
State _____ Zip _____
Phone _____ Fax _____
Email _____

Property Information

Block: _____ Lot: _____ Zone: _____ Property Size (AC/SF): _____
Existing Use: (i.e. residential home, undeveloped lot, commercial building, etc.) _____
Proposed Project: (describe) _____
Proposed Building Setbacks: Front yard _____ Rear yard _____
Side yard (left) _____ Side yard (right) _____ Height _____
A Plot/Site Plan (indicating location of existing buildings and structures, driveways, septic systems, well, etc.) must be submitted with this application. The size of existing buildings and structures shall be accurately depicted.
Total Project Cost: \$ _____
Wetland: ___YES ___NO Flood Zone: ___YES ___NO
I hereby certify that all information and dimensions noted herein, and plot/site plan submitted is true and accurate. Upon issuance of a construction permit, all dimensions listed on the plot/site plan for the new project will be adhered to.
X _____
Owner's Signature

OFFICIAL USE ONLY

Date initial Application Received: _____ Fee: \$ _____ Check #/Cash: _____
() Application Complete () Application Incomplete; Reason (s) _____

Date Missing or Corrected Information Received: _____
() Zoning Approved
() Zoning Denied; Reason (s): _____

COAH Fees Applicable () Not Applicable (); date _____
Storm Water Controls Applicable () Not Applicable (); date _____
Soil Conservation Controls Applicable () Not Applicable (); date _____

Zoning Official's Signature