



Department of Community Development & Planning  
P. O. Box 8, Blackwood, NJ 08012

Telephone: (856) 374-3512

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## APPLICATION FOR ZONING PERMIT (RESIDENTIAL)

Date: \_\_\_\_\_ Block: \_\_\_\_\_ Lot: \_\_\_\_\_

Name of Applicant: \_\_\_\_\_ Telephone: \_\_\_\_\_

Address of Applicant: \_\_\_\_\_

Name of Property Owner: \_\_\_\_\_ Telephone: \_\_\_\_\_

Address of Property Owner: \_\_\_\_\_

Work site street address: \_\_\_\_\_

Type of work and/or use: \_\_\_\_\_

Is the property subject to a Planning Board or Zoning Board of Adjustment Approval?  Yes  No  
If yes, provided application number: \_\_\_\_\_

A SIGNED PLOT PLAN OR SURVEY SHOWING ALL EXISTING BUILDINGS, STRUCTURES, SHEDS, POOLS, DRIVEWAYS, PATIOS, WALKWAYS, FENCES AND ANY OTHER FEATURE ALONG WITH THE PROPOSED BUILDING/STRUCTURE DIMENSIONS, HEIGHT, AND DISTANCE (SETBACKS) FROM AT LEAST TWO (2) PROPERTY LINES **MUST BE SUBMITTED WITH THIS APPLICATION.**

### ZONING PERMIT EXEMPTIONS

Siding	Roofing	Replace existing steps	Windows
Doors	Sewer/Septic	Electrical (interior only)	Interior renovations

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**1. DWELLING:** \_\_\_\_\_  
Type: Single family (SFD) or Two family (TFD)      Building Area (sq. ft.)      Height

**2. ADDITION:** \_\_\_\_\_  
L x W and/or sq. ft.      Height      Stories      Use: (i.e., bedroom, bathroom, etc.)

**3. GARAGE:** \_\_\_\_\_  
L x W and/or sq. ft.      Height      Stories      Second garage (Yes/No)

**4. SHED:** \_\_\_\_\_  
L x W and/or sq. ft.      Height      Stories      Second shed (Yes/No)

**5. POOL:** \_\_\_\_\_  
L x W and/or sq. ft.      Type (Above ground or Inground)

**6. FENCE:** \_\_\_\_\_  
Style      Height

**7. OTHER:** \_\_\_\_\_  
L x W and/or sq. ft.      Proposed Use/Construction (i.e., deck, patio, driveway, etc.)

I understand if any of the information is incorrect an approval may be voided.

\_\_\_\_\_  
(OWNER'S NAME)

\_\_\_\_\_  
(OWNER'S SIGNATURE)