

## APPLICATION FOR ZONING PERMIT WASHINGTON TOWNSHIP

43 Schooley's Mountain Road, Long Valley, NJ 07853

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**ZONING OFFICER: Dan Flaherty** 

Block:	Lot:	Zone:		
		Size of Prop	erty:Acres and/or S.F.	
L		l .		
Owner's Name:	Property Address:	Telephone No:	E Mail Address:	
		Fax No:		
PAYABLE TO WASHINGTON TOWNSHIP – FORM WILL NOT BE PROCESSED WITHOUT PAYMENT				
Form of Payment: CASH Check #				
THIS ZONING PERMIT REQUEST IS FOR:				
( ) Residential New Construction / Addition / Accessory Structure - \$50.00				
Submit a survey which is true to scale, not enlarged or reduced, showing the information below PLEASE DESCRIBE:				
( ) Residential Interior conversions, including but not limited to, basement finishing				
and in-law suites that involve additional bedrooms/moving of walls - \$15.00				
Submit a sketch of the current floor plan with the proposed changes, indicating if there is new outside access				
PLEASE DESCRIBE:  ( ) Entrance Pillars / Gates/Fence-\$15.00 [fence higher than 6' & surrounding pools require a				
Building Permit]				
Submit a survey to scale which is true to scale, not enlarged or reduced, showing the proposed location				
( ) Home Occupation - \$25.00 – Submit a copy of the Home Occupation Application				
( ) Certificate of Non-Conforming Use/Structure - \$50.00 Attach Supporting Documentation				
( ) Non-Residential Construction - <b>\$50.00</b>				
Submit a survey to scale which is true to scale, not enlarged or reduced, showing the information below				
( ) Non-Residential Signs (new or change) \$25.00 – Submit a copy of the sign plan				
( ) Affidavit in Support of Request for Waiver of Site Plan/Change in Use - <b>\$50.00</b> Attach a copy of the Affidavit in Support of Request for Waiver of Site Plan				
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FOR NEW CONSTRUCTION, ADDITIONS AND NEW ACCESSORY STRUCTURES. THE FOLLOWING				
INFORMATION MUST BE <b>SHOWN TO SCALE</b> ON YOUR PROPERTY SURVEY TO DETERMINE IF THE PROPOSED				
CONSTRUCTION MEETS WASHINGTON TOWNSHIP ORDINANCE REQUIREMENTS:				
LOCATION OF HOUSE, INCLUDING CURRENT AND PREVIOUS ADDITIONS AND ALL ACCESSORY				
STRUCTURES. ACREAGE AND / OR SQUARE FEET OF PROPERTY				
	-			
REQUIRED AND PROPO	OSED SETBACKS - SEE ATTACH	ED SCHEDULE OF AREA, YARD	AND BUILDING REQUIREMENTS	
PERCENT OF IMPROVED LOT COVERAGE: .				
§ 217-34 THE MAXIMUM IMPROVED LOT COVERAGE SHALL INCLUDE ALL IMPERVIOUS SURFACES SUCH AS BUILDINGS,				
STRUCTURES, DRIVEWAYS, TENNIS COURTS AND PATIOS.				
PLEASE ANSWER THE FOLLOWING QUESTIONS:				
ARE STEEP SLOPES (OVER 15% ordinance §217-38) BEING DISTURBED WITH THE PROPOSED CONSTRUCTION?				
YES / NO IF SO,	PLEASE SHOW ON PROPE	CRTY SURVEY		
IS THE TOWNSHIP RIDGELINE (ordinance §217-38) ON OR WITHIN 100' OF THE SUBJECT PROPERTY?				
YES / NO IF SO, PLEASE SHOW ON PROPERTY SURVEY				

ARE THERE WETLANDS WITHIN 150' OF THE PROPOSED CONSTRUCTION? YES / NO IF SO, PLEASE SHOW ON PROPERTY SURVEY			
ARE THERE STREAMS / RIVERS / PONDS WITHIN 300' OF THE PROPOSED CONSTRUCTION? YES / NO IF SO, PLEASE SHOW ON PROPERTY SURVEY			
IS THERE A FLOOD PLAIN IN THE AREA OF THE PROPOSED CONSTRUCTION? YES / NO IF SO, PLEASE SHOW ON PROPERTY SURVEY			
DOES THIS PROPERTY HAVE PRIOR PLANNING BOARD OR BOARD OF ADJUSTMENT APPROVALS? YES / NO IF SO, PLEASE ATTACH A COPY OF RESOLUTION			
IS THIS PROPERTY IN AN HISTORIC ZONE OR ON AN HISTORIC REGISTER?  YES / NO  IF SO, PLEASE ATTACH A COPY OF THE WASHINGTON TOWNSHIP HISTORIC PRESERVATION APPROVAL			
IS THIS PROPERTY SERVED BY AN ON SITE SEPTIC SYSTEM?  YES / NO  IF SO, PLEASE PROVIDE A COPY OF THE WASHINGTON TOWNSHIP HEALTH DEPARTMENT APPROVAL			
WASHINGTON TOWNSHIP IS LOCATED IN THE REGULATED HIGHLANDS REGION DID THIS HOME EXIST PRIOR TO AUGUST 10, 2004? YES / NO			
IF THIS APPLICATION IS FOR NEW HOME CONSTRUCTION DID YOU OWN THE PROPERTY PRIOR TO AUGUST 10, 2004?  YES / NO			
WILL AN EXISTING HOME BE DEMOLISHED AND REPLACED?  YES / NO			
DO YOU HAVE A HIGHLANDS: EXEMPTION YES / NO IF SO, PLEASE ATTACH A COPY WAIVER YES / NO IF SO, PLEASE ATTACH A COPY APPROVAL YES / NO IF SO, PLEASE ATTACH A COPY.			
I HEREBY CERTIFY THAT THE ABOVE INFORMATION IS CORRECT TO THE BEST OF MY KNOWLEDGE			
Signature of Owner/Applicant Date  FOR OFFICE USE ONLY:			
ZONING OFFICER APPROVAL FOR:			
This is to certify that the above described premises, together with any building(s)			
thereon, used or proposed to be used for:or			
<ul> <li>as described above or in the attached documentation is approved as a:</li> <li>Use or structure permitted by Ordinance on a lot conforming to Ordinance</li> </ul>			
requirements.			
( ) Use or structure permitted by Ordinance on a lot not conforming to Ordinance			
requirements for:			
<ul> <li>( ) Front yard setback</li> <li>( ) Lot Size</li> <li>( ) Lot Frontage</li> </ul>			
( ) Rear yard setback ( ) Lot Width			
( ) Other - Specified as:			
( ) Use Permitted by a site plan/conditional use/variance approved on			
subject to the conditions of Resolution Number attached hereto.  ( ) Valid nonconforming use as established by:			
( ) Finding of the Zoning Board of Adjustment as per the attached Resolution			
of Approval Number:Dated:			
( ) By the undersigned Zoning Officer on the basis of evidence supplied by the applicant as specified on the attached documents.			
Dan Flaherty, Zoning Officer DATE			

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