

BOROUGH OF SPRING LAKE HEIGHTS

555 Brighton Avenue

Spring Lake Heights, New Jersey 07762

Phone: 732-449-3500 Fax 732-449-3535

Application for Zoning Permit

DATE _____

PERMIT # _____

Application is hereby made to the Zoning Officer for Permit to: commence and/or change a use; erect, construct, reconstruct, alter or convert a structure; as required by the "Municipal Land Use Ordinance".

PROPERTY ADDRESS

OWNERS NAME AND ADDRESS

BLOCK _____ LOT _____

PHONE _____

ZONE _____

PROPOSED USE _____

PRIOR USE _____

DESCRIPTION OF DEVELOPMENT

Applications shall include a survey showing: all buildings, dimensions, setbacks, location and dimension of fences, pools and access buildings-location of adjacent property and buildings- location of number of parking spaces and curb access- ways and other supporting data.

Manufacturing: light or craft work _____

Storage or use of combustibles _____

Sewer connection in _____ Water Meter in _____

Signs: Building Mounted _____ Free Standing _____

Will require Permits: Construction _____ Plumbing _____ Electrical _____

Health _____ Fire Dept. (Combustibles) _____ Demolition _____

Planning Board Action Received _____ Date _____

Zoning Board Action Received _____ Date _____

Site Plan Review Required _____

Certificate of Occupancy Required (Use or Construction) _____

Date _____ Check # or Cash _____