ZONING PERMIT APPLICATION
Township of Pequannock
530 Newark Pompton Turnpike, Pompton Plains, NJ 07444
973-897-0325

		973-097-0325	***************************************	
Date Received:		OFFICE USE ONLY Zoning Application No.		
	Date Received.			
Resi Acco	upancy of building CCO (4) 14'high or greater (1) To ensure timely process Both sides of application are con You have provided two (2) copie drawings. Survey must show the and bounds, drainage, waterways	CHECK TYPE OF APPLICATION New Commercial Demolition (1) Commercial Addition Porch (5) Commercial Interior Pool (3) Sign/Awning (6) Generator, Air Conditioner (1,2) Driveway/Walkway/Patio/Deck (5) Temporary Sign (1) Change of use of a property CO Zoning (4) Temporary Storage Unit (1) Other ing, please review this quick checklist before submitting your application: mplete, including owner/applicant signatures. es of a current survey/site plan along with any required construction existing conditions and exact location of physical features including metes s, specific utility locations and easements, all drawn to scale. All surveys eyor and not more than 10 (ten) years old.		
	\$200.00 for CCO or CO; \$50.00 fo	ne occupation; \$50.00 for additions; \$75.00 for new dwellings; \$100.00 for commercial zoning temporary storage unit; \$20.00 temporary sign (30 day)/\$50.00 (120 day); four times square CO/CO two separate checks. CHECKS MADE PAYABLE TO: PEQUANNOCK. TOWN	e footage	
	If any of the req ap	uested information is missing or the application is incomplete, processing of the plication will cease; applicants will be informed of same by letter.		
1. 2. 3. 4. 5. 6.	 Must be properly screened. Pools require fencing. Please indicate type, height, area of fence and location of filter/heater, decking, coping and aprons. Indicate in writing detailed description of use. Must fill out a Zoning Review Form. Fill out attached addendum PLEASE PRINT CLEARLY - NO CHARGE FOR FENCE AND SHED PERMITS 			
Street Address:BlockLot				
2.				
Address: Phone:				
3.	3. Property Owner's Name (if different from applicant):			
	Address:	Email:		
4.	Does Applicant hold a tax-exem	pt status under the Federal Internal Revenue Code of 1954-26 U.S.C., Section 501 (c) or (d) No		
5.	Current approved use of structure on property:			
6.	Proposed new use or structure to be constructed on the property:			
7.	Name of New Business:			
8.	Square footage allocated for Use:			
9.	Number of parking spaces allocated of Use:			
10.	In detail, describe all work to be	performed under this permit:		
11. 12.	No If yes, provide date:	subject of any prior application to the Planning Board or Zoning Board of Adjustment? YesPlanningand Resolution. for the address located in a flood hazard zone? YesNo		

14. Does the property have any easements? Yes	
Applicant certifies that all statements and information made an information and belief. Applicant further states that all pertine	d provided as part of this application are true to the best of his/hr knowledge, nt municipal ordinances, and all conditions, regulations and requirements of site t to said property, shall be complied with. All zoning permits will be granted or
Signature of Applicant	Date
PRINT Applicant's name	
Signature of Owner	Date
Print Owner's Name	
	OFFICE USE ONLY
Fee rec'dAmount:Che	eck# Cash:
Received by:	
Approved: Denied:	
Zoning Officer:	
Code Official:	
Construction Official:	
Block Lot Applicant's Name:	
Address:	
Phone: Email:	
Owner's Name:	
Address:	
Phone:Email:	
What is the total number of existing signs?	
How many of these are free standing signs?	
Are there existing signs to be removed?	
How many businesses are at this location?	
What is the total area of all attached signs (existing and propos	ed)?
What is the dimension of the proposed sign?	
What is the area of the store front or building front?	
What is the sum of: existing signs that will remain, proposed si vacant spaces?	igns and signs that may be required for a future tenant that will occupy currently
Signature of Applicant	Date
Signature of Owner	Date