

**BOROUGH OF LITTLE FERRY
215-217 LIBERTY STREET
LITTLE FERRY, NJ 07643
201-641-9234 x 664
ZONING PERMIT**

Date Received: _____
Date Issued: _____

Permit #: Z
Signature of Agent: _____

Printed Name: _____
Description of Work: _____

Estimated Cost of Work: \$ _____
(Property Survey Required showing location)

_____ Fence
_____ Shed
_____ Sidewalk
_____ Driveway
_____ Apron
_____ Other - Description _____

Permit Approved: _____ Denied: _____
Official: _____

Block: _____ Lot: _____

Work Site Location: _____
Name of Owner: _____
Address: _____
Telephone: _____

CONTRACTOR INFORMATION:

Name: _____
Address: _____
Telephone: _____
Fax: _____
Federal Employee # _____
NJ Registration # _____

- NOTES: 1) SIDEWALK AND APRON MUST BE POURED AS SEPARATE PIECES
2) SIDEWALK AND APRON MUST BE CONCRETE
3) ALTERATIONS, CHIPPING OR MODICATIONS OF ANY KIND TO THE CURB ARE NOT AUTHORIZED BY THIS PERMIT. "CURB WORK REQUIRES A ROAD OPENING PERMIT BEFORE START OF WORK"
4) INSPECTIONS REQUIRED**

BOROUGH OF LITTLE FERRY ZONING PERMIT APPLICATION

ZONING PERMIT NUMBER: _____
(Leave Blank; Zoning Officer Will Assign Number)

1. ADDRESS/LOCATION OF PROPERTY:

2. ZONING DISTRICT IN WHICH THE PROPERTY IS LOCATED: _____

3. APPLICANT'S NAME, ADDRESS and PHONE NUMBER:

4. OWNER'S NAME, ADDRESS and PHONE NUMBER (if not applicant)

5. APPLICATION IS HEREBY MADE TO:

- ERECT A STRUCTURE PRINCIPAL ACCESSORY
- ADD TO A STRUCTURE PRINCIPAL ACCESSORY
- CHANGE USE OF STRUCTURE
- ESTABLISH A HOME OCCUPATION
- ERECT A FENCE
- INSTALL SWIMMING POOL IN-GROUND ABOVE-GROUND
- INSTALL OFF-STREET PARKING AREA DRIVEWAY
- ERECT A SIGN SIDEWALK

FAILURE TO COMMENCE THE WORK/IMPROVEMENTS APPROVED UNDER THIS PERMIT WITHIN ONE YEAR FROM THE DATE OF ISSUANCE SHALL RENDER THE APPROVAL AS NULL AND VOID.

**PLEASE REFER TO ATTACHED SAMPLE DRAWING
YOUR ZONING PERMIT CANNOT BE PROCESSED WITHOUT IT.**

I HEREBY CERTIFY THAT THE INFORMATION CONTAINED WITHIN THIS APPLICATION IS TRUE, CORRECT AND ACCURATE TO THE BEST OF MY KNOWLEDGE. IT IS UNDERSTOOD AND AGREED BY THIS APPLICANT THAT AN ERROR, MISSTATEMENT OR MISREPRESENTATION OF MATERIAL FACT, EITHER WITH OR WITHOUT INTENTION ON THE PART OF THIS APPLICANT, SHALL CONSTITUTE SUFFICIENT GROUNDS FOR THE REVOCATION OF THE APPROVAL OF THIS PERMIT.

SIGNATURE OF APPLICANT

DATE

SIGNATURE OF OWNER

DATE

IF YOU ARE BOTH THE APPLICANT AND THE OWNER OF THE PROPERTY, SIGN BOTH OF THE ABOVE LINES. THE OWNER'S SIGNATURE IS ALWAYS REQUIRED. FAILURE TO PROVIDE OWNER'S SIGNATURE WILL RESULT IN YOUR APPLICATION BEING DEEMED INCOMPLETE AND IT WILL BE RETURNED TO YOU.

APPROVED DENIED

SIGNATURE OF ZONING OFFICER

DATE

**ALL INFORMATION BELOW IS TO BE COMPLETED BY
BOROUGH ZONING OFFICER**

A. IF THE PERMIT IS DENIED, THE ZONING OFFICER SHALL NOTE THE APPLICABLE SECTIONS/BASIS OF DENIAL BELOW:

B. A COPY OF THE ZONING OFFICER'S OFFICIAL LETTER OF DENIAL SHALL BE ATTACHED TO THIS PERMIT.

C. HAS THE APPLICANT/OWNER REQUESTED AN APPEAL OF THE ZONING OFFICER'S DECISION TO THE ZONING HEARING BOARD?

YES

NO

UNDECIDED/PENDING

D. IF APPLICABLE, DATE OF WRITTEN REQUEST OF APPEAL: _____

ATTACH COPY OF APPLICANT/OWNER'S WRITTEN REQUEST FOR APPEAL TO ZONING HEARING BOARD.

E. IF APPLICABLE, DATE OF SCHEDULED ZONING HEARING BOARD MEETING: _____