

# 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
- ERECT A SIGN

**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: \_\_\_\_\_**