

BOROUGH OF DEAL

ZONING PERMIT APPLICATION

Date: _____

Zoning Application Number: _____

CHECK TYPE OF APPLICATION:

- | | | |
|--|--|--|
| <input type="checkbox"/> New dwelling | <input type="checkbox"/> New commercial | <input type="checkbox"/> Demolition*** |
| <input type="checkbox"/> Residential addition | <input type="checkbox"/> Commercial addition | <input type="checkbox"/> Deck |
| <input type="checkbox"/> Accessory building | <input type="checkbox"/> Commercial interior | <input type="checkbox"/> Porch |
| <input type="checkbox"/> Interior remodeling | <input type="checkbox"/> Sign/Awning** | <input type="checkbox"/> Garage |
| <input type="checkbox"/> Fence* | <input type="checkbox"/> Driveway/Walkway/Patio | <input type="checkbox"/> Shed |
| <input type="checkbox"/> Occupancy of any building/structure | <input type="checkbox"/> Commencement or change of use of a property/structure | <input type="checkbox"/> Pool**** |
| <input type="checkbox"/> Other | | |

To ensure timely processing, please review this quick checklist before submitting your application:

_____ Both sides of application are complete, including owner/applicant signatures.

_____ You have provided two (2) copies of a current survey/site plan. Surveys must show the existing conditions and exact location of physical features including metes and bounds, drainage, waterways, specific utility locations, easements, lot measurements, setbacks, building heights and impervious coverage, all drawn to scale. All surveys *must* be prepared by a land surveyor and not more than 5 years old.

_____ The Permit fee: \$20.00. Checks shall be made payable to: Borough of Deal.

_____ If required, \$2,000 escrow check for engineer review and site inspection.

If any of the requested information is missing or the application is incomplete, processing of the application will cease; applicants will be informed of same by letter.

* Indicate location, height, and type of fence on survey. Survey must be to scale and not more than 5 years old.

** For signs please provide the dimensions and location of the wall to which the sign would be attached.

*** Tank removal is exempted.

**** Pools require a fence. Please indicate type, height, and area of fence and location of filter/heater and any decking, coping and aprons.

PLEASE PRINT CLEARLY:

1. Location of property for which Zoning Permit is desired:

Street Address: _____ Block(s): _____ Lot(s): _____ Zone: _____

2. Applicant's Name (*May be property owner, contractor, architect, etc.*): _____

Phone(s): _____ Email: _____

Applicant's Address: _____

3. Property Owner's Name (*If different from applicant*): _____

Phone(s): _____ Email: _____

Property Owner's Address: _____

Application continues on reverse side of page:

4. Present approved use of or structure on the property: _____
5. Proposed new use or structure to be constructed on the property: _____
6. In detail, describe all work to be performed under this permit: _____

7. Has the property above been the subject of any prior application to the Planning Board or Zoning Board of Adjustment? Yes ____ No ____

If yes, provide date: _____ Board: Planning ____ Zoning: ____

Resolution # (if any): _____ (Submit a copy of the Resolution)

8. Is the proposed permit for an address located in a flood zone? Yes ____ No ____

9. Will there be a change in the grade of the property upon permit? Yes ____ No ____

If yes, provide grading plan _____

Applicant certifies that all statements and information made and provided as part of this application are true to the best of his/her knowledge, information and belief. Applicant further states that all pertinent municipal ordinances, and all conditions, regulations and requirements of site plan approval, variances and other permits granted with respect to said property, shall be complied with. All zoning permits will be granted or denied within ten (10) business days from the date of complete application.

Signature of Applicant: _____ Date: _____

Print Applicant's Name: _____

Signature of Owner (if different from applicant): _____ Date: _____

Print Owner's Name: _____

OFFICE USE ONLY

Date Application filed: _____ Received by: _____

Date Fee rec'd: _____ Amount: _____ Check #: _____ Cash: ____

Date Sent to Engineer: _____ Date Returned from Engineer: _____

Zoning Application (Date): Approved _____ Rejected _____ Pending _____

Comments: _____

Zoning Officer Signature