

CONTROL # _____



MANCHESTER TOWNSHIP ZONING PERMIT APPLICATION

ZONE _____

PROPERTY OWNER: (PLEASE PRINT OR TYPE)
DATE _____

OWNER'S NAME _____

PHONE # _____

OWNER'S ADDRESS _____

FAX # _____

EMAIL _____

DESCRIPTION OF WORK:

LOCATION OF WORK IF OTHER THAN THE PROPERTY OWNER'S ADDRESS:

REQUIRED SUBMISSIONS:

1. **NEW SINGLE FAMILY DWELLING: 3 SEALED PLOT PLANS THAT CONFORM TO ALL REQUIREMENTS \$100**
2. **TREE CLEARING: 3 SEALED PLOT PLANS SHOWING ALL LIMITS OF CLEARING. \$75**
3. **TREE REFORESTATION: 3 SEALED PLOT PLANS PREPARED BY A N.J. LICENSED TREE PROFESSIONAL. \$150**
4. **ALL OTHER DEVELOPMENT: ACCURATE TO SCALE SURVEY DEPICTING ALL PROPOSED & EXISTING DEVELOPMENT (E.G. *SHED, ADDITION, DECK, FENCE, A-G POOL, EVSE) \$35 FOR THE FIRST CONSTRUCTION, ERECTION OR ALTERATION AND \$10 FOR EACH ADDITIONAL CONSTRUCTION, ERECTION OR ALTERATION.**
5. **I-G SWIMMING POOLS, GARAGES, COMMERCIAL ADDITIONS, & COMMERCIAL ACCESSORY STRUCTURES: \$50**
6. **NEW BUSINESS TENANT: MUST PROVIDE A DETAILED DESCRIPTION OF USE ALONG WITH ALL SIGNAGE. \$35**
7. **SIGNAGE: 3 SETS OF ELEVATION RENDERINGS & PLOT PLAN DETAILING SIGN LOCATION. \$35 PER SIGN.**
8. **HOME OWNER'S ASSOCIATION APPROVAL IS REQUIRED FOR ANY DWELLING IN RETIREMENT COMMUNITY.**

OWNER'S SIGNATURE _____

AGENT TENANT CONTRACT PURCHASER (CIRCLE ONE)

NAME _____

CONTACT # _____

ADDRESS: _____

FAX NUM. _____

EMAIL _____

I HEREBY CERTIFY THAT THE PROPOSED WORK IS AUTHORIZED BY THE OWNER OF RECORD AND THAT I HAVE BEEN AUTHORIZED BY THE OWNER TO MAKE THIS APPLICATION AS HIS/HER AGENT OR TENANT AND WE AGREE TO CONFORM TO ALL APPLICABLE ZONING LAWS OF THIS JURISDICTION.

(AGENT/TENANT/CONTRACT PURCHASER'S SIGNATURE)

FOR OFFICE USE ONLY

DATE RECEIVED: _____

CONTROL # _____

ZONING OFFICER: APPROVED _____

DENIED (REASON) _____

SECRETARY: BD. APP. YES ___ No ___ IF YES, CASE # _____ RESOLUTION ATTACHED: Y OR N

PAYMENT: CASH _____ CHECK _____ CC _____ RECEIPT # _____