APPLICATION FOR ZONING PERMIT TOWNSHIP OF SANDYSTON

133 Route 645

Sandyston, NJ 07826

ZONING OFFICER/LAND USE ADMINISTRATOR Phone 973-948-3520, ext. 205

Fees:

Zoning Permit \$20.00 Sign Permit \$15.00

Date

. 18	ix 973-948-0783		Check payal	ble to Sandyston Tou	vnship or exact amount cas
Ďa	te of Application		Block	Lot	Zone
Na	me of Applicant			Phone	
Nai	me of Owner (if diffe	erent)		Phone	
		1		•	
Арр	licant address (if di	fferent)		,	
Туре	e of Work: Principal	Use or Structure _	Accessor	y Use or Structure _	Sign
Char	nge of Use: Yes	No Cun	rent Use		
	osed Work to be do				·
*Wha midwa *Are t At pr If a	ing Board of the To nce at is the height of ar ay between the pea there wetlands on o tach plot plan or su oposed structures, application is for a S rvey showing location iminated, lighting de	ny new structure? (in the roof and the roof and the roof and the property showing size of and distances to a slign, attach a sket on of sign in relation etails must be shown.	to the highest poir ne uppermost plat perty? of plot, bounding sell property lines are ch of the sign and in to streets, build wn.	treets, size, type and wetlands. all dimensions, as ings, driveways, etc.	niot nian or europy man. I
Date _				The second of the telephone	
	r website for ordinance	permit must be approve s & setback information	n: www.sandystontow	SUance of any building (Clerk Forms & Information
\$	Check #	For Cash Page 1	or official use only syment received b	, y	Date
	Zoning perm lication Approved	it shall be granted or d	enied within 20 days	from the date application	on is filed.
) App	lication Denied	State reason fo	r action taken:		