

APPLICATION FOR ZONING PERMIT

TO ALTER OR USE A STRUCTURE, OR TO USE LAND IN ACCORDANCE WITH THE ZONING ORDINANCE OF THE TOWNSHIP OF DELANCO, NEW JERSEY

Date: _____ 20____ Application No: _____

I/We _____, the undersigned, hereby make application for a permit to alter/erect/use a _____ story building on my property located at _____ Block: _____ Lot: _____

The general shape of my lot and the location of my proposed building/alteration are accurately set forth, in plan, on the opposite page/attached survey. ZONE DISTRICT: _____

Building (or land) to be used for: (A) One Family Detached Dwelling; (B) Two Family Detached Dwelling; (C) _____ Family Apt. House; (D) Other Use (Explain Below)

What is the present building or land used for _____
Explanation of (D) – (If more space is required, use separate sheet of paper)

Brief explanation of alteration to show compliance with Zoning Ordinance:

Applicant: _____ Address _____ Phone: _____
(Print Name)
Contractor: _____ Address _____ Phone: _____
(Print Name)
Architect: _____ Address _____ Phone: _____
(Print Name)

Approximate Cost of Construction: \$ _____

(FOR ZONING OFFICER USE ONLY)

Zoning Permit Required: Yes or No (circle one)
Approved _____, 20____ Zoning Permit No. _____
Refused _____, 20____ (if required)

Reason for Refusal:

Zoning Officer Signature: _____ Date Signed: _____

Township of Delanco Official Disclaimer
Please be advised that if your property is part of a Homeowner's Association, it is your responsibility to determine if the improvements that you are seeking also require approval from your Homeowner's Association.

This Application must be returned within 90 days or applicant must reapply.
I hereby acknowledge that I have read this application and state that the above is correct and agree to comply with all Township Ordinances and State Laws regulating Zoning.

The Township of Delanco does not research and/or enforce Homeowner Association by-laws.

Applicant Signature _____