

APPLICATION FOR ZONING PERMIT

Permit # _____

OLDMANS TOWNSHIP

40 Freed Rd., PO Box 416, Pedricktown, NJ 08067

Date: _____

To alter, erect, place or use a structure or to use land in accordance with the Building and Zoning Ordinance or Subdivision of the Township of Oldmans, I do hereby make application to the Zoning Officer for a permit to do the following; _____

APPLICANT'S NAME _____

APPLICANT'S SIGNATURE _____

APPLICANT'S ADDRESS _____

APPLICANT'S TELEPHONE _____

OWNER'S NAME _____

OWNER'S ADDRESS _____

OWNER'S TELEPHONE _____

Relationship of Applicant to Owner (tenant, agent, purchaser under contract, same person, or other)

LOCATION OF PREMISES _____

BLOCK _____ LOT _____

The premises are now located in the following zone (check):

() AR Agricultural Residential

() C Commercial

() R Residential

() I Industrial

() VR Village Residential

() CI Commercial Industrial

() VC Village Commercial

() Residential Cluster (Lennox Run)

Zoning: () Approved () Denied (reason for denial) _____

Permit Fee: \$10.00 Check # _____ Cash _____ Date: _____

Melinda Taylor, Zoning Officer