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File # _____
Fee \$50.00 Rcpt # _____
Chk # _____ Date: _____

Zoning Permit Application

Site Address _____ Property ID# _____

Applicant:

Name: _____ Phone: _____ Email: _____

Name: _____ Phone: _____ Email: _____

Address _____

Property Owner (if different from Applicant):

Name: _____ Phone: _____ Email: _____

Name: _____ Address _____

____ Commercial Use ____ Residential Use Is this rental property? ____ Yes or ____ No

Contractor Company Name: _____

Address: _____

Phone #: _____ Email: _____

____ Accessory Building (200 sf or less) ____ Fence (7 ft high or less) ____ Retaining Wall (4 ft high or less)

____ Driveways, Sidewalks, Concrete/Asphalt Pads or other Impervious Surface Material (that are not part of an accessible route)

____ Decks & Platforms (not more than 30" above grade, not attached to a structure with frost footings and not part of an accessible route)

Project Description: _____

In signing this application, I hereby acknowledge that I have read and fully understand the applicable provisions of the Zoning and Subdivision ordinances and current administrative procedures. I further acknowledge the fee explanation as outlined in the application procedures and hereby agree to pay all statements received from the Township pertaining to additional application expense(s).

I hereby certify that the information contained in this application is to my knowledge a true, accurate and complete representation of the facts and conditions concerning the proposed sketch / concept plan. I hereby authorize the Linwood Township authorized staff to enter upon this property for such inspections as necessary for the review of this application.

Signature(s)

Applicant: _____ Date: _____ Owner: _____ Date: _____

Applicant: _____ Date: _____ Owner: _____ Date: _____

SITE PLAN: Attach an additional sheet, if necessary. Please show the following information for all existing and proposed structures on the parcel of property involved and for all structures on adjoining lots. Attach an additional sheet, if necessary.

- 1. Lot lines, with dimensions
- 2. Structure location and dimensions
- 3. Shoreline (if any)
- 4. Setback from structure(s) to:
 - a. Shoreline and OHWL
 - b. Side lot line
 - c. Road
- 5. Setback from sewage system to:
 - a. Show tanks and drain field
 - b. Side lot lines
 - c. Structures
- 6. Setback from well to:
 - a. Structures
 - b. Sewer System
 - c. Side lot line

To help us evaluate your request, please provide as much supplementary information as possible, such as maps, plans, information about surrounding property, etc.

Office Use Only

Date Submitted: _____

Date Application deemed complete: _____

Zoning Administrator: _____

Date: _____

Approved Denied

Zoning Administrator: _____