BOROUGH OF ROOSEVELT 33 N. ROCHDALE AVENUE, P.O. BOX 128 ROOSEVELT, NJ 08555

TEL 609-448-0539, FAX 609-448-8716

ZONING APPLICATION NO. _____

The undersigned hereby applies for a Zoning Certificate, to be issued on the basis of the representations contained in this application.

NEW E	BUILDING PERMIT: \$50.00 or		ING PERMIT FEES: RMIT: \$25.00 (addition	ons. decks. pod	ol. shed. patios. s	zenerator. fence. etc.)
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1.	Street Address of Property		BLOCK	<	_ LOT	-
2.	Name of Owner		Tel#			
	Address					-
3.	Name of Applicant		Tel#			-
	Address					-
4.	If applicant is not the owner, state t	he applicant's ir	nterest in this property			-
5.	Proposed: (circle): Fence / Deck / Po					- - -
6.	Survey of the entire property showing proposed structures is attached.			existing and		
7.	Remarks:					-
						-
Applica	nt's Signature		Date			_
RECORI	O OF PAYMENT: AMOUNT	CHECK#	CAS	SH		
	ZONII	NG CERTIFICATE	NO			
	basis of the representations made in a table is hereby approved.	the above appli	cation, which applicatio	on is part hered	of, the applicatio	n for a Zoning
			Jeremy Kuipers Zoning Officer		Date	_
	IF YOU ARE APPLYING FOR OF THE PROPERTY OWNER TO PR			_		
		DENIAL (OF ZONING CERTIFICAT	ΓE		
	basis of the above application, the rep ne Borough Zoning Ordinance, and				_	
						_

Revised Dec 2021 Jeremy Kuipers Date Zoning Officer