



Township of Fredon
443 Route 94, Newton, New Jersey 07860
Tel. 973-383-7025 Fax 973-383-8711

ZONING PERMIT NO: _____ ZONING DISTRICT: _____

Date: _____ Block: _____ Lot: _____ Telephone No.: _____

Owner: _____ Applicant: _____

Contact Email: _____

Address of Owner: _____

Address of Applicant: _____

Property Location: _____

A PLOT PLAN OR SURVEY OF THE PROPERTY SHOWING EXISTING AND PROPOSED STRUCTURES, DIMENSIONS OF STRUCTURES, DISTANCES FROM PROPERTY LINES, LOCATION OF SEPTIC TANK AND LEACH FIELD, AND LOCATION OF ANY BUILDING CONSTRAINTS (ie., SLOPES, FLOODPLAINS, WETLANDS, STREAMS, ETC.), MUST BE INCLUDED WITH THE APPLICATION.

The proposed work at the above described premises, together with any building thereon is to be used as (describe proposed work):

State whether the property has been the subject of any prior applications to the Zoning Board of Adjustment or the Planning Board. If none, state none. If so, state the nature of the application, the date, and the action of the Board(s).

I hereby make application for a zoning permit for the change described above and on the attached plan or survey map. I understand that before starting construction a building permit may be required. Answers to the above question and representations made on the attachments to this application are true and complete to the best of my knowledge.

Signature of Applicant

Approved: _____ Date: _____ Fee: _____ Check No. _____ Cash: _____

Denied: _____ Date: _____ Reason (see page 2 for details): _____

Arlene Fisher, Zoning Officer
973-383-7025, Ext. #25
zoning@fredonnj.gov



Township of Fredon
443 Route 94, Newton, New Jersey 07860
Tel. 973-383-7025 Fax 973-383-8711

Date: _____ **Block:** _____ **Lot:** _____

Reason: _____

Land Use Board Review Required For:

- _____ C Variance
 - _____ Front yard setback
Fredon Code Chapter, Section _____
 - _____ Side Yard Set back
Fredon Code Chapter, Section _____
 - _____ Minimum Lot Width
Fredon Code Chapter, Section _____
 - _____ Accessory Building/Structure
Fredon Code Chapter, Section _____
 - _____ Undersize Lot
Fredon Code Chapter, Section _____
 - _____ Environmental Constraints (Steep Slope, Wetlands, Etc.)
Fredon Code Chapter, Section _____
 - _____ Other
Fredon Code Chapter, Section _____

_____ D Variance
Fredon Code Chapter, Section _____

_____ Site Plan Review
_____ Minor _____ Major

_____ Subdivision
_____ Minor _____ Major

Zoning Permit Escrow Collected (if required)

Fee: _____ Check No. _____ Cash: _____ Reason: _____