

**Washington Township  
Warren County, New Jersey**

211 State Route 31 North

Washington, NJ 07882

908-689-1851

Fax 908-835-1749

**APPLICATION FOR ZONING PERMIT**

Permit No. \_\_\_\_\_

Block \_\_\_\_\_ Lot \_\_\_\_\_

Zone \_\_\_\_\_

Applicant's Name \_\_\_\_\_

Address \_\_\_\_\_

Phone # \_\_\_\_\_ Fax \_\_\_\_\_

Address of property for which request is made \_\_\_\_\_

Name of property owner \_\_\_\_\_

Address of property owner \_\_\_\_\_

Purpose of Application and Use \_\_\_\_\_

Description of proposed structure (length, width, height) \_\_\_\_\_

Has this property been the subject of any prior application to the Land Use Board? \_\_\_\_\_.

If yes, state the date, relief sought, and the results. \_\_\_\_\_

The following documentation shall be provided, if applicable; 1. Board approvals, 2. Driveway Permit, 3. Well and Septic Permits, 4. Food Handling Permit, 5. Soil Disturbance Permit, 6. Stream/Wetland Encroachment Permit, 7. Others required by law, 8. **Property survey or Plot Plan**

Date \_\_\_\_\_ Applicant signature \_\_\_\_\_ Owner's signature \_\_\_\_\_

**ZONING OFFICER'S USE ONLY BELOW**

This application meets all applicable zoning requirements of the Township of Washington

Zoning Officer \_\_\_\_\_ Date \_\_\_\_\_

Denied for the following reason: \_\_\_\_\_

Zoning Officer \_\_\_\_\_ Date \_\_\_\_\_

**THIS IS NOT A BUILDING PERMIT**