CON NO TO RORO ST. 18AT

DEPARTMENT OF PLANNING, ZONING & CODE ENFORCEMENT

49 Union Street • Medford • NJ 08055

• PHONE: 609/654-2608 x315 • FAX: 609/714-1790

CHECKLIST OF THE SUBMISSION OF A NON-RESIDENTIAL ZONING PERMIT**

	Completed zoning permit application. The application shall be completely filled out and signed by both applicant and owner (if applicable).
Settler Reconstruction of the Administration	One (1) sealed site plan/survey.
<u> </u>	If approval has been granted by the Planning and Zoning Board, submit a copy of the Resolution.
	Submit an existing floor plan and a proposed floor plan for a change of tenant. A letter must be submitted identifying the type of proposed business use. The letter must describe the existing use.
	One (1) copy of Architectural plans if change in building exterior is proposed.
	Sign permits are required for each new sign and refacing of any/all existing signs. (See separate Sign Permit application form).
	Appropriate Zoning Permit fee



ZONING PERMIT APPLICATION

DEPARTMENT OF PLANNING & ZONING 49 UNION STREET

MEDFORD, NJ 08055 PHONE: (609) 654-2608 x315

1)	BLOCK #	LOT #	ZONING DISTRICT	AGE OF PROPERTY:		
2)	PROPERTY OWN	ER'S NAME:				
	ADDRESS:					
	DAY PHONE #:		EMAIL:			
	Signature:		Print Name:	Date:		
3)	APPLICANT'S NA	ME: (If different fro	om Property Owner)			
4) ADDRESS/LOCATION OF WORK:						
	DAY PHONE #:		EMAIL:			
	Signature:	ANALAMAN ANA	Print Name:	Date:		
5)	CONTRACTOR/C	COMPANY:		Contact Person:		
6)	ADDRESS:		PHONE:	EMAIL:		
	Signature:		Print Name:	Date:		
7)	PROPOSED USE (COMMERCIAL/I	RESIDENTIAL) IF COMMERCIA	AL, SPECIFIC TYPE OF BUSINESS:		
8)	NEW CONSTRUC Fence)(Check		NGE OF USE/TENANTIM	PROVEMENT (i.e., Pool, Addition, Shed,		
9)	DESCRIPTION OF	F IMPROVEMEN	T(S):			
	WILL THIS DEAL	LIDE DEMOVAL	OR WINDERCO IF CO	TYANN NA ANIYO		
	WILL THIS REQU		OF TREES? IF SO ON SURVEY LOCATION OF TRI			
			, , , , , , , , , , , , , , , , , , ,			
10) PROPOSED SET	TBACKS: Front	Rear Right S	ideLeft Side		
11	FOR FENCES:	Height (front ya	ard)(side yard)			

ZONING PERMIT APPLICATION (Page 2)

12)	UTILITI	ES (CI	ieck a	ll that ap	ply):	*Septic		Well	I	Public S	ewer_		_ Public	Water	l [*]		
*	*BE ADVIS	SED A L	ETTER	R FROM BI	URLII	NGTON COL	UNTY H	IEALTH DI	<u>EPARTI</u>	MENT PI	ROPER	TIES W	<u>'ITH SEI</u>	TIC MA	Y BE F	REQUIE	ED.*
	ASSOCI. * <u>if yes, p</u>	ATION LEASE	PER	SECTION SECTIO	ON 60 HOME	D BY A HO 05 OF ORI COWNER AS I IN QUEST	DINAI SOCIA	NCE 1992 TION COU	-1(2)	Yes		No					<u>CIATION</u>
14)	HAS A V	/ARIA	NCE	EVER B	EEN	GRANTE	D FO	R THIS P	ROPE	RTY Y	es	No	l <u> </u>				
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										··· •·· •·· •·· •·· •·· •·· •·· •·· •··	=====			=====			
]	FOR (OFFICE	USE	ONLY							
Prop	osed Proj	ect was	appro	ved by:	2	Zoning Boar	·d	P	lanning	g Board			Other (specify)			
App	lication#					Approva	l Date			Mer	norializ	zation #	<i>+</i>				<u>.</u>
Casl	1	Ch	eck#_		An	nount		Zoning	Control	#		Initial	s:	Da	ite:		
Revi	iewed By:	· · · · · · · · · · · · · · · · · · ·		D	ate:		A	approved _		Der	nied		Zon	ing Per	mit # _		
Senc	i to Const	ruction:	Yes	□ No													
<u>Des</u>	scriptio	n/Note	es:														
Form	ıs/Zoning Pe	rmit – Ap	plicatio	on Only 05/2	24/202	21											



DEPARTMENT OF PLANNING AND ZONING

49 Union Street • Medford • NJ 08055

PH: 609/654-2608 X 315 FAX: 609/714-2109

www.medfordtownship.com

FILL OUT A SEPARATE SHEET FOR EACH SIGN --- FEE REQUIRED: \$100.00 PER SIGN

NAME OF BUSINESS:	CONTACT:
ADDRESS: E	
TYPE OF SIGN: (Check all that apply) Temporary Permanent Free Standing Building Mounted One Sided Two Sided If Other, Explain	IF BUILDING MOUNTED: Linear Building Frontage Wall Surface Area Where Sign To Be Attached: Height Width
SPECIAL SIGNS:	
Development Sign Multiple Occupancy & Tenancy Sign Roof Sign Functional Sign Window Sign Other Special Sign Explain SIZE: Length Width Square Fe Height (Free Standing Only) Light Source (Mercury Vapor, High Pressure Sodium, Etc.) _	et
ATTACH THE FOLLOWING: Scaled sketch of sign - show dime lighting fixtures and show angles of illumination.	nsions, identify construction materials, locate
For Free Standing Signs: Provide scaled location plandriveways and show landscaping. For Building Mounted Signs: Provide scaled plan locating states.	
windows, doors, etc.	
OTHER PERMITS REQUIRED:	
Construction Electrical	
APPROVED FOR PERMIT	
(Administrative Officer) DISAPPROVED FOR PERMIT	DATE
Reason:	
(Administrative Officer)	DATE

ZONING PERMIT FEES

§901. Fees

A. Every application for development shall be accompanied by a check payable to the Township of Medford in accordance with the following schedule:

17.	Zonin	g Permit Fees	Application Charge					
	(a)	1 or 2 Family Dwelling Unit	\$100					
	(b)	Multiple Dwelling Building	\$200					
	(c)	Additions or rehabilitation of fences, Sheds, above ground pools or any Improvements requiring issuance of zoning permit	\$50					
	(d)	Inground Pools (includes pool grading plan)	ş \$150					
	(e)	Non-residential development authori by Site Plan Approval	ized \$250					
	(f)	Change of Tenant	\$75					
	(g)	Sign and/or Refacing Permit	\$100					

[NOTE: There are no escrow account charges for the above applications]