

MAYOR
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VICTOR M. BARRERA | PARKS & PUBLIC PROPERTY
MARIELKA A. DIAZ | PUBLIC AFFAIRS
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CODE ENFORCMENT/BUILDING DEPARTMENT

THOMAS O'MALLEY | CONSTRUCTION OFFICIAL
TOMOMALLEY@WESTNEWYORKNJ.ORG
O. 201.295.5170

TOWN OF WEST NEW YORK

COUNTY OF HUDSON, NEW JERSEY



MUNICIPAL BUILDING

428-60th STREET
WEST NEW YORK, NEW JERSEY 07093
(201).295.5100

OFFICE LOCATIONS

PUBLIC LIBRARY 425-60th STREET
(201).295.5135

SENIOR CENTER 515-54th STREET
(201).295.5162/5144

FIRE PREVENTION 6015 TYLER PLACE
(201).295.5220

PUBLIC WORKS 6300 BROADWAY
(201).295.5230/5231

PARKING SERVICES 224-60th STREET
(201).295.1575

WEST NEW YORK, NEW JERSEY 07093

MUNICIPAL PERMIT APPLICATION

ORDINANCE NUMBERS 24/15, 25/15, 4/16, 2/20

SAME MUST BE COMPLETED ENTIRELY OR WILL BE REJECTED

SEE FEE SCHEDULE ON APPLICATION* MAKE PAYABLE TO TOWN OF WEST NEW YORK

() SHED () FENCE () SIDEWALK () CURB-CUT () DUMPSTER () TREE

DATE: _____

PERMIT NUMBER: _____

BLOCK: _____

LOT: _____

PROP. ADDRESS: _____

PLACEMENT/LOCATION: _____

PROPERTY OWNER INFORMATION

(LLC'S MUST INCLUDE PRINCIPAL OR WILL BE REJECTED)

PROP. OWNER: _____

PROP OWNER ADDRESS: _____

CELL PHONE: _____ EMAIL ADDRESS: _____

CONTRACTOR INFORMATION

(LLC'S MUST INCLUDE PRINCIPAL OR WILL BE REJECTED)

CONTRACTOR NAME: _____

CONTRACTOR ADDRESS: _____

CELL PHONE: _____ EMAIL ADDRESS: _____

AMOUNT PAID: _____ CHECK NO.: _____ REC'D BY: _____ DATE REC'D: _____

The Town of West New York is proud to be a drug free workplace and an equal opportunity employer.

MUNICIPAL PERMIT REQUEST 6-21-23

@townofWNY

www.westnewyorknj.org

#WEAREWNY



A CURRENT COPY (NOT OLDER THAN TEN YEARS) OF THE PROPERTY SURVEY MUST BE SUBMITTED WITH THIS APPLICATION OR SAME WILL BE REJECTED. SAME MUST SHOW LOCATION OF SHED/FENCE SAME IS IN ACCORDANCE WITH ORDINANCE NUMBERS 24/15, 25/15, 4/16

- ☐ **SHEDS** (100 SQ. FT OR LESS, NO HIGHER THAN 12 FT AS MEASURED FROM GRADE) \$ 100.00
(No shed shall be installed in the front yard or side yard leading to the rear yard. No shed shall be installed within three feet of a rear or side property line or within ten feet of another structure. Failure to obtain permit - \$50.00 fine plus the cost of the permit)

COPY OF SURVEY ()

(Said copy shall be no more than 10 years old. Said copy must show the location of the proposed shed)

COPIES OF CONTRACTOR'S LICENSE & CERT. OF INSURANCE ()

- ☐ **FENCE** (6 FT. OR LESS) (HIGHER THAN 6 FT, UCC PERMIT REQUIRED) \$ 100.00
(No fence may be erected in a residential, commercial or mixed use front yard. For corner lots, the front yard shall be that yard which faces the primary entrance to the residence, commercial or mixed use building. In the side and rear yards of residential, commercial and mixed use properties, a fence may be erected to a maximum height of six feet. Failure to obtain permit - \$50.00 fine plus the cost of the permit)

COPY OF SURVEY ()

(Said copy shall be no more than 10 years old. Said copy must show the location of the proposed fence)

COPIES OF CONTRACTOR'S LICENSE & CERT. OF INSURANCE ()

- ☐ **SIDEWALK REPLACEMENT** (FOR THE FIRST 300 SQ. FT) \$ 50.00
(EACH ADD'L 100 SQ. FT) \$ 20.00

TOTAL SQUARE FEET: _____

COPIES OF CONTRACTOR'S LICENSE & CERT. OF INSURANCE ()

- ☐ **CURB CUT-REPLACEMENT** QUANTITY: _____ (EACH) \$ 5.00

COPIES OF CONTRACTOR'S LICENSE & CERT. OF INSURANCE ()

- ☐ **DUMPSTER** (EACH) \$100.00
(Fee is for seven days, including weekends. Dumpsters must be removed by 12:00 the day after your permit expires. Furthermore, it is your responsibility to contact the Traffic Division 48 hours prior to the placement of the dumpster(s) if placed on public property. Should you require additional time, it is your responsibility the Building Dept. to obtain a new dumpster permit; otherwise fines(s)/penalties shall be imposed.)

ASSOCIATED PERMIT NUMBER: _____

DUMPSTER COMPANY NAME: _____

DUMPSTER COMPANY ADDRESS: _____

TYPE OF DEBRIS (CIRCLE ONE) CONSTRUCTION DEMOLITION CLEANOUT

CAPACITY OF DUMPSTER: ____ YARDS

DATE OF DELIVERY: _____ DATE OF REMOVAL: _____

- ☐ **TREE PERMIT** () REMOVAL () PLACEMENT QUANTITY: _____ (EACH) \$ 25.00
() TRIMMING ONLY \$ 15.00

() I have reviewed the attached copy of Ordinance Number 2/00 dated 2/16/00 and fully understand its contents. _____ INITIAL _____ DATE

Soil Disturbance Permit () Certificate of No Interest ()
