

**BOROUGH OF CLAYTON, NJ**

125 NORTH DELSEA DRIVE, CLAYTON, NJ 08312

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www.claytonnj.com

ZONING PERMIT APPLICATIONDate _____ Fee _____ Check# _____ Cash _____ **Block** _____ **Lot** _____ **Zone** _____**Owner:** _____ **Applicant or Tenant:** _____

Authorized Agent: Must submit signed affidavit from owner authorizing Agent to secure Zoning Permit

Address of Applicant: _____**Phone #:** (____) _____ **Cell Phone #:** (____) _____

E-Mail Address: _____

Address for which permit is to be issued _____**# OF TREES TO BE REMOVED** _____ **PER CHAPTER 87****Type of work:** _____ **Commercial** _____ **Residential**____ New Home ____ Fence ____ Deck ____ Driveway ____ Other ____ In Ground Pool ____ Above Ground Pool ____ Sign ____ Addition ____
Garage ____ Shed ____ Solar Panels – INCLUDE # OF PANELS IN DESCRIPTION

Structures (I.E. New Home, Additions, Garages, Sheds) - _____ Length _____ Width _____ Height _____

Change of Occupant/Owner: Prev. Occ.: _____ New Occ.: _____

Change of Use: Prev. Use.: _____ New Use: _____

Description of work and use: (YOU MUST SHOW THE WORK ON THE SURVEY, INCLUDE SETBACKS AND DIMENSIONS. I.E. 12' X 10' SHED PLACED 5' FROM PROPERTY LINES). PLEASE DRAW ON THE SURVEY WHERE THE STRUCTURE IS GOING TO BE LOCATED ON THE PROPERTY.

NOTE: Has the above premises been the subject of prior approvals either before the Zoning or Planning Board?

____ No ____ Yes (Supply Resolution # _____ and approval date _____)

Applications must be SIGNED BY OWNER and submitted with:

1. **A copy of the sealed NJ licensed land survey; not tax map, A DRAWING IS NOT SUFFICIENT.** This shows the layout of your property with improvements and how it is set on your property. The proposed work and setbacks must be shown on this survey. **See description of work & use above.**

a. Sign applications must include a color rendition and dimensions with application. Note: A separate permit is needed from the County or State for Signs on County or State Roads.

b. If you are a tenant: An executed lease may be required upon Zoning Permit approval.

c. Attach a copy of Homeowners Association Approval, if applicable.

2. **Appropriate fee of \$35.00**

If structure is 600 sq. ft. or greater, Grading Plan Application approval is required from Township Engineer

I hereby certify that the information furnished on this application and all supplemental materials is accurate and true knowing that the Zoning Officer will rely upon the accuracy. I understand that if any of the above statements are false, it will nullify the permit and may be subject to fines and/or penalties.

Applicant: _____

Print Name

Signature

Owner: _____

Print Name

Signature

Taxes on Property are _____ . **DENIED OR APPROVED**
Permit # _____ Date: _____ ZO Signature: _____