



105 KENNEDY BOULEVARD
SOMERDALE, NJ 08083

ZONING PERMIT APPLICATION \$50 Fee Non-Refundable

Survey Required

SUBJECT PROPERTY _____ **BLOCK** _____ **LOT** _____

OWNER NAME: _____ **PHONE:** _____

OWNER ADDRESS: _____

OWNER EMAIL: _____

CONTRACTOR NAME: _____ **PHONE:** _____

CONTRACTOR ADDRESS: _____

CONTRACTOR EMAIL: _____

COMMERCIAL

OR

RESIDENTIAL

WHAT WAS THE PREVIOUS USE: _____

WHAT IS THE PROPOSED NEW USE: _____

WHAT IS THE NEW CONSTRUCTION/ADDITION DIMENSIONS: _____

LENGTH _____ **X WIDTH** _____ **X HEIGHT** _____

WHAT ARE THE PROPOSED SET BACKS: SIDE _____ **REAR** _____ **FRONT** _____ **SIDE** _____

WHAT IS THE HEIGHT OF THE SOLAR ARRAY: _____

WHAT IS THE HEIGHT AND STYLE OF NEW FENCE: _____

APPLICANT SIGNATURE _____ **DATE** _____

ZONING OFFICER SIGNATURE _____ **DATE** _____

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Check if taxes are current (office use only)

Debbie Simone
Planning/Zoning Officer

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