

EAST WINDSOR TOWNSHIP

INSTRUCTIONS FOR ZONING PERMIT APPLICATION

1. Zoning Permit Application must be completely filled out.
2. All setbacks must be shown on plan, including side, rear and front yard setbacks to the proposed construction.
3. It is imperative that you provide information on the size and location of all structures (including pools, sheds, decks) on the property in question. This information is needed to calculate lot coverage information.
4. You must also provide information on the size and location of all areas covered by impervious surface, i.e. sidewalks and driveways.
5. If the application is for a swimming pool and a deck or patio is to be included as part of the swimming pool, this information must be noted on the plan showing location and size of all construction so that proper calculations can be done.
6. If the application is for a deck, you must note on the plan if the soil under the deck is to be covered in any way. Please note that this may not be permitted in all zones.
7. If the application is for a fence, you must indicate type of fence in detail and show location of fence on plot plan, including all setback information.
8. PLEASE BE ADVISED THAT THE ZONING OFFICER HAS 7 DAYS TO REVIEW A COMPLETED APPLICATION. ONCE YOU OBTAIN A ZONING PERMIT YOU MAY NEED TO APPLY FOR A CONSTRUCTION PERMIT. ALL PERMITS MUST BE RECEIVED BEFORE YOU CAN SCHEDULE OR BEGIN ANY WORK ON THE PROPOSED PROJECT. THE CONSTRUCTION OFFICE HAS 20 DAYS TO REVIEW AND APPROVE A COMPLETED APPLICATION. THIS APPLICATION IS INDEPENDENT OF THE ZONING PERMIT APPLICATION AND APPROVAL. PLEASE MAKE SURE THAT YOU ALLOW ENOUGH TIME FOR REVIEW AND APPROVAL OF ALL THE NECESSARY PERMITS.

FAILURE TO SUBMIT ANY OR ALL OF THE ABOVE INFORMATION ON THE PLOT PLAN OR FAILURE TO COMPLETE THE ZONING PERMIT APPLICATION MAY RESULT IN A DELAY IN PROCESSING YOUR APPLICATION.



(609) 443-4000 x202
FAX: (609) 443-6865
construction_official@east-windsor.nj.us

ROMAN J. PETRUNIAK
DIRECTOR OF INSPECTIONS
CONSTRUCTION OFFICIAL
BUILDING SUBCODE OFFICIAL
ZONING OFFICER

EAST WINDSOR TOWNSHIP
16 LANNING BLVD., EAST WINDSOR, NJ 08520-1999

APPLICATION FOR A ZONING PERMIT

DATE: _____ PHONE NO. _____

LOCATION: _____
(STREET ADDRESS)

BLOCK AND LOT NUMBER: _____

OWNER OF RECORD: NAME: _____

MAILING ADDRESS: _____

ZONING DISTRICT: _____ LOT AREA: _____

PROPOSED USE: _____

ACCESSORY USES: _____

YARDS: FRONT: _____ REAR: _____ SIDE: _____

ENCROACHMENTS (FLOOD PLAIN, ETC.): _____

BUILDING DIMENSIONS (OUTSIDE MEASUREMENTS): _____

TOTAL SQUARE FEET OF BUILDING (USE OUTSIDE DIMENSIONS): _____

PERCENT OF TOTAL LOT COVERAGE: PROJECT _____ TOTAL _____
(Includes all impervious surfaces; ie, pavement, sidewalk, and all structures)

HEIGHT OF BUILDING: _____

NUMBER OF STORIES: _____

ESTIMATE COST: _____

I hereby certify that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his or her authorized agent and we agree to conform to all applicable laws of this jurisdiction.

Signature of Applicant _____ Address _____ Date _____

DO NOT WRITE BELOW THIS LINE

ZONING OFFICER'S FINDINGS

PLANNING BOARD APPROVAL REQUIRED? _____ ZONING BOARD? _____

OTHER REMARKS: _____

APPROVED: _____
(DATE)

(ZONING OFFICER)