

Stillwater Township
Zoning Officer
964 Stillwater Road
Newton, NJ 07860
(973)383-6332
Fax: (973)383-8059

ZONING PERMIT NO. _____ ZONING DISTRICT _____

Date _____ Block _____ Lot _____ Phone # _____

Owner _____ Applicant _____

Address of Owner _____

Address of Applicant _____

Property Location _____

A PLOT PLAN OR SURVEY OF THE PROPERTY SHOWING EXISTING AND PROPOSED STRUCTURES, DIMENSIONS OF STRUCTURES, DISTANCES FROM PROPERTY LINES, LOCATION OF SEPTIC TANK AND LEACH FIELD, AND LOCATION OF ANY BUILDING CONSTRAINTS (i.e. SLOPES, FLOODPLAINS, WETLANDS, STREAMS, ETC.) MUST BE INCLUDED WITH THE APPLICATION.

The proposed work at the above described premises together with any building thereon is to be used as
(describe the proposed work): _____

State whether the property has been the subject of any prior applications to the Zoning Board of Adjustment or the Planning Board. If none, state none. If so, state the nature of the application, the date, the action of the Board(s).

I hereby make application for a zoning permit for the change described above and on the attached plan or survey map. I understand that before starting construction, a building permit may be required. Answers to the above questions and representations made on the attachments to this application are true and complete to the best of my knowledge.

Signature of Applicant

Approved _____ Date _____ Fee _____ Check # _____ Cash _____

Denied _____ Reason _____

Zoning Officer Hours:

Tuesday 12 noon - 4 p.m.

Thursday 2 - 4 p.m.

Friday 8 a.m. - 4 p.m.

Arlene Fisher, Zoning Officer