

For Zoning Officer Use Only

Permit #	ZP
Effective Date	
Expiration Date	

Borough of Far Hills
 6 Prospect Street
 Far Hills, NJ 07931
 908-234-0611 x18
 Fax: 908-234-0918



ZONING PERMIT APPLICATION
\$125.00 FEE MUST ACCOMPANY APPLICATION
ORDINANCE #2015-04

DATE:	ZONE:	BLOCK:	LOT:
NAME OF APPLICANT:		ADDRESS:	
PHONE NUMBER: HOME/CELL		EMAIL:	
REASON FOR APPLICATION: (ADDITION, FENCE, DECK, POOL, ETC.)			
STORIES TO BE OCCUPIED:		SQUARE FOOTAGE TO BE OCCUPIED:	
<input type="checkbox"/> 1. ATTACH A CERTIFIED PLOT PLAN OF THE PROPERTY SHOWING THE PROPERTY'S DIMENSIONS AND EXISTING BUILDINGS ON THE PROPERTY. <input type="checkbox"/> 2. DESCRIBE THE ACTIVITIES TO BE CONDUCTED ON THE PROPERTY FOR WHICH THIS APPLICATION IS SUBMITTED. <hr/> <hr/>			
HAS THE ABOVE PROPERTY BEEN SUBJECT OF ANY OTHER PRIOR APPLICATION TO THE PLANNING BOARD? _____ YES _____ NO			
IF YES, DESCRIBE: _____ <hr/>			
APPLICANT'S SIGNATURE:		DATE:	

<u>FOR OFFICE USE ONLY</u>	
<input type="checkbox"/> APPROVED <input type="checkbox"/> DENIED	COMMENTS: _____ <hr/>
_____ ZONING OFFICER	DATE: _____