



LACEY TOWNSHIP DEVELOPMENT / ZONING PERMIT APPLICATION

Property Owner: (Please Print or Type) _____

Date _____

Owner's Name _____

Phone/Cell Number _____

Owner's Address _____

Fax Number _____

E-Mail Address _____

Description of Work: _____

Location of work if other than the property owner's address:

Required Submissions and Special Conditions (Read Prior to Signing)

NEW SINGLE FAMILY DWELLING - Three (3) sealed plot plans as per code requirements of Chapter 335-79B. A \$500 check made payable to the Township of Lacey for Engineering Review/C.O. Inspection fee to accompany application.

COMMERCIAL DEVELOPMENT – Three (3) sealed Site plans as per Board Approval

ALL OTHER DEVELOPMENT – One plot plan showing all existing and proposed improvements.

POOLS – Fence Enclosures for pools must comply with the International Residential Code 2009 NJ AG105.2

LOT GRADING – Chapter 335-79B6 Final lot grade shall not change approved drainage pattern or create adverse storm water conditions off-site.

WETLANDS – If present on site, Owner responsible for depicting wetlands and buffers as approved by the NJ Department of Environmental Protection on survey submitted for development

****FLOOD HAZARD AREAS – ELEVATION CERTIFICATE REQUIRED WITH APPLICATION****

ANY ADDITIONAL DOCUMENTATION AS MAY BE REQUIRED BY THE ZONING OFFICER.

{ OWNER'S SIGNATURE _____

<u>Agent</u>	<u>Tenant</u>	<u>Contract Purchaser</u>	<u>(Circle one)</u>
Name _____			Phone/Cell Number _____
Address _____			Fax Number _____
			E-Mail Address _____
<p>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/her agent or tenant and we agree to conform to all applicable Zoning laws of this jurisdiction.</p>			
<p>{ (Agent/Tenant/Contract Purchaser's Signature) _____</p>			

CONTROL # _____	FOR OFFICE USE ONLY		RECEIVED BY: _____
Block _____	Lot _____	Tax map _____	Zone _____ Flood Zone _____
ZONING OFFICER:	APPROVED _____	DENIED _____	
ZONING PERMIT FEE DUE \$ _____	PAYMENT _____	CASH _____	CHECK # _____