

BOROUGH OF SURF CITY, COUNTY OF OCEAN, NJ

813 Long Beach Boulevard, 08008 Telephone (609)494-6448

ZONING PERMIT

PERMIT NUMBER _____

(To be completed by Zoning Dept.)

Fee \$75 CK _____ Cash _____ Received By _____ 2 Surveys Received with Application _____
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DATE _____

APPLICANT/CONTRACTOR _____ **PHONE #** _____

EMAIL _____

PROPERTY OWNER _____ **PHONE #** _____

EMAIL _____

PROPERTY ADDRESS _____ **BLOCK** _____ **LOT** _____

DESCRIPTION OF WORK

=====Please Do Not Write Below This Line=====

Minimum Requirements:

Proposed:

Lot Size _____

Front Setback _____

Side Setbacks _____

Rear Setback _____

Height _____

Lot Coverage _____

As Built Survey Required ()YES ()NO

Curb Required ()YES ()NO

Zone /Use _____ **Flood Zone** _____ **Base Flood Elevation** _____

First Finished Floor Elevation _____

REQUIREMENTS/NOTES:

APPROVED _____
Zoning Officer

DENIED _____
Zoning Officer

Applicant's Signature **Print Name**