

TOWNSHIP OF HARMONY
APPLICATION FOR ZONING PERMIT
NON-REFUNDABLE APPLICATION FEE OF \$20.00
CASH OR CHECKS MADE OUT TO THE TOWNSHIP OF HARMONY

- PRINT CLEARLY WITH INK, do not use pencil. Please answer all questions.
- **Attach a plot plan or survey of the property, drawn to scale, showing what exists now on the property and what changes you propose to make. INCLUDE DISTANCES FROM ALL YOUR PROPERTY LINES AND EXISTING STRUCTURES/WELL/SEPTIC**
- Include existing and proposed structures, septic areas, pools, sheds, wall location, paved areas, signs, etc. Show the dimensions of each.
- If a new residential dwelling is proposed, show the footprint dimension and the livable floor area of each floor and each dwelling unit. Livable floor area does not include the floor space taken by basement, cellar or garage. *Plans for the proposed construction must accompany application.*
- If the applicant is other than the property owner, an affidavit of ownership may be needed.

Name of Applicant	Name of Owner (if different)
Address of Applicant	Address of Owner (if different)
Phone	Phone
What is the <i>present</i> use of the <i>principal</i> building?	
What is the <i>proposed</i> use of the <i>principal</i> building?	
What is the <i>present</i> use(s) of any <i>accessory</i> building(s)?	
What are the <i>proposed</i> uses of any new structures or additions for which a zoning permit is requested?	

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

Actual address of premises _____ Block No. _____ Lot No. _____

Zone _____

I hereby make application for a zoning permit for the changes described above and on the attached plot 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 any attachments to this application are true and complete to the best of my knowledge.

VALID EMAIL ADDRESS: _____
PRINT CLEARLY

Date _____ Signature of Applicant _____

APPLICANT DO NOT WRITE BELOW HERE

Amt. Fee Received _____ Date Received _____ Emailed To Zoning _____

Date Permit Issued: _____ Date Denial Issued: _____

REASON FOR DENIAL: _____

ZONING RELIEF REQUIRED FROM: _____

Signature of Zoning Officer