APPLICATION FOR ZONING OFFICER REVIEW

WORKSITE LOCATION: ADDRESS:_____ BLOCK:_____ LOT:_____ ZONE:_____	The applicant certifies that all statements and information made and provided as part of this application are true to the best of the applicant's knowledge, information, and belief. The applicant further states that the applicant will comply with all other Municipal approvals and ordinances, and all County, State, and Federal Regulations as may be required. Applicant's Signature:_____

OWNER INFORMATION:

NAME:_____ EMAIL:_____

ADDRESS:_____PHONE:_____

APPLICANT INFO IF DIFFERENT FROM OWNER:

NAME:_____EMAIL:_____

ADDRESS:_____PHONE:_____

NAME OF COMPANY:_____

PROPOSED PROJECT (Please Check all that May Apply)

___Addition _____Alteration _____New Single Family Dwelling _____New Two Family Dwelling

___Fence _____Driveway ___Walkway _____Shed _____Pool _____Deck _____Patio ___Other:_____

DESCRIPTION OF PROPOSED PROJECT:

_____

Zoning Officer Review Findings:
___Approved _____Denied _____Foundation Location Survey Req. _____Approved w/ Conditions
Official Comment/Conditions:

_____

The Borough of River Edge Zoning Officer reserves the right to waive any of the above required supplemental information that may not be pertinent to the proposed construction/project as well as to require additional information not listed above that may be useful in determining zoning compliance for the proposed construction/project.

_____   _____
River Edge Zoning Officer   **Date**