APPLICATION FOR ZONING PERMIT

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<tr>
<th>Owner</th>
<th>Name</th>
<th>Address</th>
<th>Telephone</th>
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<tr>
<td>Contractor</td>
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<td>Arch/Eng</td>
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<td>Applicant</td>
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Street Address of Premises for which zoning permit is desired: ____________________________
Describe in detail the activity contemplated: __________________________________________

Estimated Cost: ____________________________

Survey or sketch (must be attached). Note: New developments are required to have surveys.

Lot Ground Coverage _________ Sq. Ft. Source of Sanitary Waste Disposal: _______________
Total Floor Area _________ Sq. Ft. Known Chemicals/Haz. Materials: _______________

Have premises been subject to any prior development applications or zoning permits? Yes [ ] No [X]
If yes: dates _________ Board _________ Action _________

Applicant’s Signature ____________________________ Name of Corporation ____________________________

Date _________ Owners Signature _________ Date _________

Request for Appeal: The applicant may appeal the decision of the Zoning Office to the Board of Adjustment within 65 days of final action of the Zoning Office. If an appeal is desired you must file three copies of your request for appeal which shall specify the grounds upon which the appeal is being made.

Obtained all other pertinent local clearances ____________________________

Other CONDITIONS of approval: ____________________________

WARNING: Violation of permit will result in penalties: Ordinance #_____________

NOTICE TO BOROUGH ENGINEER: Verification of foundation line on new building for setback for new construction.

Date of Inspection _________ Compliance _________ Non-Compliance _________
If applicant is found in non-compliance-state reason(s) ____________________________

Local Clearance Plan Review ____________________________

Other governmental approvals required: D.E.P. [ ] D.O.T. [ ] Board of Health [ ] Building Permit [ ] County Planning Board [ ]
Certificate of Occupancy [ ] Continued Certificate of Occupancy [ ]

Other ____________________________

Extension Granted ____________________________

PLAN REVIEW AND/OR PERMIT B # L #

Address:
Commercial $ ____________
Residential $ ____________
Engineer Inspection $ ____________

TOTAL FEE $ ____________

RECEIVED BY ____________________________
Approved By: ____________________________

(1) Zoning Office, (2) Engineer, (3) Building Inspector, (4) Applicant Copy