

TOWNSHIP OF MARLBORO  
(732) 536-0200  
APPLICATION FOR ZONING APPROVAL

Permit # \_\_\_\_\_

BLOCK \_\_\_\_\_ LOT \_\_\_\_\_ DAYTIME PHONE \_\_\_\_\_ EMAIL \_\_\_\_\_

OWNER'S NAME \_\_\_\_\_

OWNER'S ADDRESS \_\_\_\_\_

WORKSITE ADDRESS (If Different) \_\_\_\_\_

Application is hereby made for a Zoning Permit in accordance with the requirements of the Township of Marlboro. The sub-joined statement and drawings submitted herewith are hereby made a part of this application. I hereby agree to comply with all ordinances and governing regulations of the Township of Marlboro. If any use or building or structure applied for herein shall be in violation of the above, the zoning officer shall have the right to stop such use or work on the premises until such violation shall have been corrected and there shall be no liability on the part of the Township of Marlboro because of such stoppage.

CONTRACTOR'S NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

PHONE \_\_\_\_\_

\* Explain in detail the proposed construction: \_\_\_\_\_

\* State size of new construction (sq. ft.) and dimensions: \_\_\_\_\_

\* Attach two (2) copies of survey with proposed construction drawn in to scale. Survey must be up to date and must be certified by homeowner stating that, "This survey is a true and exact representation of my property as it exists today."

For Tenant Fit-Up: Name of Business \_\_\_\_\_ USE \_\_\_\_\_

New Construction: Model Name \_\_\_\_\_ Development \_\_\_\_\_

Attach two copies of reduced front elevation.

If "Look-A-Like", list three structural changes:  
1. \_\_\_\_\_  
2. \_\_\_\_\_  
3. \_\_\_\_\_

COUNTY OF MONMOUTH  
:SS:  
STATE OF NEW JERSEY

**AFFIDAVIT TO BE SIGNED BY APPLICANT**

DATE: \_\_\_\_\_

I, \_\_\_\_\_, being of full age and duly sworn, depose and say that I am the owner in fee simple of the premises herein described and shown on the accompanying drawings, and that the use or occupancy herein described will be done in accordance with all laws and ordinances of the Township of Marlboro thereto.

All statements herein made by me are true to the best of my knowledge and belief.

\* Sworn to and Signature of Applicant  
Subscribed before me this

\_\_\_\_\_  
Date \_\_\_\_\_ 20 \_\_\_\_\_

\_\_\_\_\_  
day of \_\_\_\_\_ 20 \_\_\_\_\_

Signature of Applicant  
or \_\_\_\_\_  
Date \_\_\_\_\_ 20 \_\_\_\_\_

Signature of Agent  
(if accompanied by authorization letter from homeowner)

NOTARY PUBLIC

\*\*\*\*\* (for office use only) \*\*\*\*\*

Approved  \_\_\_\_\_ Denied  \_\_\_\_\_

\_\_\_\_\_  
Date \_\_\_\_\_

Zoning Officer Signature

\*\*\*\*\*

Approved  \_\_\_\_\_ Denied  \_\_\_\_\_

\_\_\_\_\_  
Date \_\_\_\_\_

Municipal Engineer Signature

\*\*\*\*\*

**UPDATE**

DESCRIBE IN DETAIL PROPOSED CHANGES: \_\_\_\_\_

Attach two (2) copies of survey with proposed changes drawn to scale. Attach two sets of signed plans.

\_\_\_\_\_  
Date \_\_\_\_\_ 20 \_\_\_\_\_

Sworn to and Signature of Applicant  
Subscribed before me this

Signature of Applicant  
or \_\_\_\_\_  
Date \_\_\_\_\_ 20 \_\_\_\_\_

\_\_\_\_\_  
day of \_\_\_\_\_ 20 \_\_\_\_\_

Signature of Agent  
(if accompanied by authorization letter from homeowner)

NOTARY PUBLIC

\*\*\*\*\* (for office use only) \*\*\*\*\*

\_\_\_\_\_  
Date \_\_\_\_\_ Approved  Denied

Zoning Officer