

APPLICATION FOR ZONING PERMIT SPRINGFIELD TOWNSHIP

General Information:			Date				
Name of Applicant:				Phone r	number:		
Is this an update to a pre	viously submitted	application?	_YES	NO	Permit No.:		
Block:		Lot(s):			Zone:		
Work Site Location:			Pro	perty Own	ner:		
Property owners Address:			Phone No.:				
Existing Use:			Proposed Use:				_
Description of Work:							
I hereby certify that the to make	4 4	thorized by the owner is/her agent and we aş				0 0	wner
Applicant / Agent's Sig	gnature	Contact Person		Phone	#	Email	
Submitted:T		t Plans showing ex side, and rear setb					
Check One: Lot Dep	oth:	Lot Frontage:	Lot V	Width:			
If Variance Approval	<i>Granted</i> : Date: _		Appli	cation No	.:		_
• Setbacks of Princip	al Structure:						
Front	Rear	Smallest Side	A	Aggregate		_ Second Front	
Ground Floor Area:	Existing		Proposed _		Total		_ Sq. Ft.
Size of Lot	% of Lot cover	ed by building	Heig	ht	_ Impervious R	atio	_
• Setbacks of Accesso	ry Structure:						
Front Rear	Smalles	st Side	Aggregate		_ Second Fron	ıt	_
• Swimming pool dista	ance from water's	edge of pool to: S	ide Yard:	Rear Y	'ard:		
• Fencing: Type:		Height:	Loca	tion:			
This application is:	Approved	d Denie	d	Require	es review by T	wp. Profession	al(s)
Application Fee: \$7	5 Exact Cash	or Check Red	eived: Cas	h / Chec	ck		
Zoning Officer	D	ate					