

BOROUGH OF HADDON HEIGHTS

Office of Zoning

625 Station Ave, Haddon Heights, NJ 08035
Phone: 856-547-2959
www.haddonhts.com
email: hhzoning@comcast.net

APPLICATION FOR ZONING/LAND USE

Block: _____ Lot: _____ Zoning Classification: _____

Address: _____

Owner: _____ Phone: _____

Owner Address: (If different than above) _____

Proposed construction or use: _____

Setbacks for the proposed construction:

Front _____ feet Rear _____ feet Right Side _____ feet Left Side _____ feet

Percentage of ground coverage: _____ Height: _____

Frontage of Lot _____ lineal ft. Corner Lot _____ sq. ft. Inside Lot _____ sq. ft.

A survey or plot plan must be submitted with application showing all existing buildings, sheds, pools, driveways, etc. along with the proposed construction. There is a \$25 fee for the zoning application and review from the Zoning Officer.

Applicants Signature

Date

DO NOT WRITE BELOW THIS LINE

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 This application has been examined and found to be in compliance with the Zoning Ordinance for the Borough of Haddon Heights.

Permits are required: U.C.C. _____ Municipal Permit _____ Historic _____

This application has been rejected because of non-compliance with the Zoning Ordinance for the Borough of Haddon Heights _____

Revised application received on _____

Rejected applications can be revised to comply with the Zoning Ordinance or you may apply to the Planning Board for relief by contacting the Zoning Official.

Ron Newell, Zoning Official

Date