



FORM E

**ZONING PERMIT APPLICATION**

Control # \_\_\_\_\_

**CITY OF HACKENSACK**

410 East Railroad Avenue

Hackensack, NJ 07601

Phone: (201) 646-3920 Ext. 2020 Fax: (201) 646-8052 e-Mail: bmclaughlin@hackensack.org

**Survey/ Floor/ Site Plan Must Be Submitted with Zoning Application**

**Must Include Property Line Setbacks and Calculation of Coverage and/or Impervious Coverage**

**\*\*\*Please Note: Incomplete Applications Will Be Automatically Denied\*\*\***

**MUST CALL FOR FINAL INSPECTION**

**PROPERTY LOCATION:** \_\_\_\_\_

Block: \_\_\_\_\_ Lot(s): \_\_\_\_\_ Zone: \_\_\_\_\_

Applicant Name: _____	Property Owner Name: _____
Applicant Address: _____	Owners Address: _____
City, State, Zip: _____	City, State, Zip: _____
Email Address: _____	Email Address: _____
Phone #: _____	Phone #: _____

Check purpose of application below:

- \_\_\_ Zoning Fee: \$50.00
- \_\_\_ Signage Fee: \$50.00, see below for further instruction
- \_\_\_ Fence, Patio, Driveway, Walkway, Shed Fee: Minimum - \$60.00, *see page 2 for additional fees*

**FOR SIGNAGE APPLICATION: for signage, must include colored rendering, denoting square footage, letter size, colors and mounting information, along with property line setbacks**

Describe Current Use of Property, in Detail:

Describe Purpose of Application, in Detail:

- a. Days and Hours of Operation: \_\_\_\_\_
- b. Days and Hours Open to the Public: \_\_\_\_\_
- c. Traffic concerns pertaining to your application: \_\_\_\_\_
- a. Days and Hours of any deliveries (truck, cars, or vans): \_\_\_\_\_
- b. Number of vehicles to be parked on site overnight (trucks, cars, or vans): \_\_\_\_\_
- c. Number of employees on site (highest shift): \_\_\_\_\_
  - a. If new construction is proposed, the location, dimensions, and all the other setbacks from the property lines must be shown clearly.
  - b. If this site has had any Planning or Zoning Board approvals in the past, please attach copy of the same.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**OFFICE USE ONLY:**

**Fee:** \_\_\_\_\_ **Check#:** \_\_\_\_\_ **Receipt#:** \_\_\_\_\_ **Received by:** \_\_\_\_\_

**APPLICATION For Permit to Install or Replace a Fence, Patio, Driveway, Walkway, or Shed (under 200 sq. ft.):**

*Fences or other man-made enclosures MUST BE AT LEAST three inches off the property line into YOUR side; the "Nice" side of the fence must face your neighbor; Dimensions of fence must be approved by zoning official. The fence installer must measure and run string along three inch indent from stakes – he must take pictures and send to Bridget McLaughlin BEFORE installing fence; Pictures after installation and a final inspection are required. \*Note: The location is your responsibility – proceed at your own risk – if a property dispute arises, it is between the neighbors – not the zoning office.*

Residential \_\_\_\_\_ Commercial \_\_\_\_\_

Description of work:

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**\*NOTE:** The minimum fee required by the City Land Use Ordinance is \$20.00 per \$1,000.00 of estimated work, with a *minimum fee of \$60.00.*

Estimated cost of work: \_\_\_\_\_

Example:

Est. cost of work \$5,000.00

÷ 1,000

x 20

\$ 100.00 Application Fee

**\*NOTE:** Commercial paving jobs will require a \$2,500.00 escrow deposit, along with a completed W-9 Form and professional striping plan.

Height of fence: \_\_\_\_\_ Type of fence: \_\_\_\_\_ Does Fence surround pool or hot tub? YES: \_\_\_\_\_ NO: \_\_\_\_\_

**CONTRACTOR INFORMATION:**

Name: \_\_\_\_\_ Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Federal ID # \_\_\_\_\_

E-Mail Address: \_\_\_\_\_ Contractor Registration #: \_\_\_\_\_

**I hereby certify that I am the owner/agent of record and am authorized to make this application;**

Applicant Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**OFFICE USE ONLY:**

Remarks: \_\_\_\_\_

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Final Inspection Date: \_\_\_\_\_ Approved by: \_\_\_\_\_