



**TOWNSHIP OF FRANKFORD**  
**APPLICATION FOR ZONING PERMIT**  
**APPLICATION FEE \$35.00**

Date: \_\_\_\_\_ Block: \_\_\_\_\_ Lot: \_\_\_\_\_, Zone: \_\_\_\_\_

Physical location Street: \_\_\_\_\_ Email: \_\_\_\_\_

Name of Applicant: \_\_\_\_\_ Phone # \_\_\_\_\_

Mailing Address: \_\_\_\_\_, City: \_\_\_\_\_ State \_\_\_\_\_, Zip Code: \_\_\_\_\_

Name of Owner: \_\_\_\_\_ Phone # \_\_\_\_\_

Mailing Address: \_\_\_\_\_, City: \_\_\_\_\_ State \_\_\_\_\_, Zip Code: \_\_\_\_\_

1) State purpose for which this Zoning Permit is requested: \_\_\_\_\_

\_\_\_\_\_

2) Attach (2) two surveys showing the size of property, bounding streets; size, type and location of existing and proposed structures along with distances to all property lines.

3) Describe the use for the building and or accessory building you will be applying for: \_\_\_\_\_

\_\_\_\_\_

4) State whether any of the activities described in Item #3 above are conducted as a non-conforming use. If so, please explain: \_\_\_\_\_

5) To your knowledge, has the above premises been subject to any prior applications to the Land Use Board: Yes , No , If yes, Type of Variance: \_\_\_\_\_

Approved or Denied \_\_\_\_\_ Resolution Date: \_\_\_\_\_

\_\_\_\_\_  
Applicant's Signature

Paid: Check # \_\_\_\_\_, Cash \_\_\_\_\_, Collected by: \_\_\_\_\_, Date: \_\_\_\_\_

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