

Borough of Barrington
229 Trenton Avenue, Barrington, NJ 08007
Phone: 856-547-0706 Fax: 856-547-1392



APPLICATION FOR ZONING

APPLICATION# _____
BLOCK _____
LOT _____
DATE _____

OWNER _____
ADDRESS _____
PHONE NUMBER _____ ZONING DISTRICT _____
REQUESTED APPLICATION OR USE (BE SPECIFIC): _____

APPLICANT'S SIGNATURE _____ DATE _____

*THERE IS A \$40.00 APPLICATION FEE. RECEIVED _____

A PLOT PLAN SHOWING EXISTING BUILDINGS & PROPOSED BUILDINGS OR PROPOSAL WITH ALL FRONT, SIDE & REAR YARD SETBACKS IS TO BE INCLUDED.

THIS APPLICATION HAS BEEN EXAMINED AND FOUND TO BE IN COMPLIANCE WITH ALL THE ZONING REQUIREMENTS.

ZONING OFFICER'S SIGNATURE _____ DATE _____

THIS APPLICATION IS DISAPPROVED BECAUSE OF NONCOMPLIANCE WITH THE FOLLOWING SECTION(S) OF THE ZONING CODE _____

ZONING OFFICER'S SIGNATURE _____ DATE _____

REJECTED APPLICATIONS MAY BE REVISED TO COMPLY WITH THE ZONING CODE. YOU MAY APPLY TO THE PLANNING BOARD FOR RELIEF FROM THE ZONING REQUIREMENTS IN THE FORM OF A VARIANCE APPLICATION.

IF A VARIANCE IS NECESSARY, WILL YOU BE APPLYING FOR ONE? YES NO
WHEN A VARIANCE IS GRANTED, A COPY OF THE MEMORIALIZATION RESOLUTION MUST BE ATTACHED TO THE APPLICATION.

A COPY OF THIS APPLICATION WILL BE FILED WITH THE TAX RECORDS OF THE PROPERTY.