



DEPARTMENT OF PLANNING, ZONING & CODE ENFORCEMENT

17 North Main Street • Medford • NJ 08055

• PHONE: 609/654-2608 x312 or x315 • FAX: 609/953-7720

CHECKLIST OF THE SUBMISSION OF A NON-RESIDENTIAL ZONING PERMIT**

- _____ Completed zoning permit application. The application shall be completely filled out and **signed by both applicant and owner** (if applicable).

- _____ One (1) sealed site plan/survey.

- _____ If approval has been granted by the Planning and Zoning Board, submit a copy of the Resolution.

- _____ Submit an existing floor plan and a proposed floor plan for a change of tenant.
A letter must be submitted identifying the type of proposed business use. The letter must describe the existing use.

- _____ One (1) copy of Architectural plans if change in building exterior is proposed.

- _____ Sign permits are required for each new sign and refacing of any/all existing signs. (See separate Sign Permit application form).

- _____ Appropriate Zoning Permit fee (\$250.00).



ZONING PERMIT APPLICATION

DEPARTMENT OF PLANNING & ZONING

17 NORTH MAIN STREET

MEDFORD, NJ 08055 PHONE: (609) 654-2608 x315 or x312

1) BLOCK # _____ LOT # _____ ZONING DISTRICT _____ AGE OF PROPERTY: _____

2) PROPERTY OWNER'S NAME: _____

ADDRESS: _____

DAY PHONE #: _____ CONTACT PERSON: _____

Signature: _____ Print Name: _____ Date: _____

3) APPLICANT'S NAME: (If different from Property Owner) _____

ADDRESS/LOCATION OF WORK: _____

DAY PHONE #: _____ EMAIL: _____

Signature: _____ Print Name: _____ Date: _____

4) CONTRACTOR/COMPANY: _____ Contact Person: _____

ADDRESS: _____ Phone: _____ Fax: _____

Signature: _____ Print Name: _____ Date: _____

5) PROPOSED USE (COMMERCIAL/RESIDENTIAL) IF COMMERCIAL, SPECIFIC TYPE OF BUSINESS: _____

6) NEW CONSTRUCTION _____ CHANGE OF USE _____ IMPROVEMENT (i.e., Pool, Addition, Shed, Fence) _____
(Check one)

7) DESCRIPTION OF WORK: _____

8) PROPOSED SETBACKS: Front _____ Rear _____ Right Side _____ Left Side _____

Fences: Height (front yard) _____ (side yard) _____ (rear yard) _____

Will fence enclose a pool? Yes _____ No _____ (If yes, you must see the Construction Dept.)

9) UTILITIES (Check all that apply): Septic _____ Well _____ Public Sewer _____ Public Water _____

FOR OFFICE USE ONLY

Proposed Project was approved by Zoning Board _____ Planning Board _____ Other (specify) _____

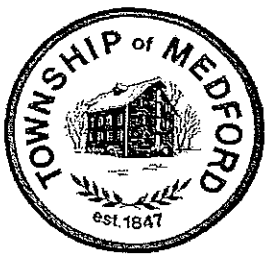
Application # _____ Approval Date _____ Memorialization # _____ Date: _____

Application Denied: _____ Date: _____ Reason(s): _____

Zoning Permit#: _____ Cash _____ Check # _____ Zoning Control # _____ Initials: _____ Date: _____

Reviewed By: _____ Date: _____ Approved _____ Denied _____

Description:



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17 North Main Street • Medford • NJ 08055

PH: 609/654-2608 X 315 FAX: 609/714-2109

www.medfordtownship.com

FILL OUT A SEPARATE SHEET FOR EACH SIGN --- FEE REQUIRED: \$100.00 PER SIGN

NAME OF BUSINESS: _____ CONTACT: _____

ADDRESS: _____ EMAIL: _____

TYPE OF SIGN: (Check all that apply)

Temporary ____ Permanent ____ Free Standing ____
Building Mounted ____ One Sided ____ Two Sided ____
If Other, Explain _____

IF BUILDING MOUNTED:

Linear Building Frontage _____
Wall Surface Area Where Sign To Be
Attached: Height ____ Width ____

SPECIAL SIGNS:

Development Sign ____ Off-Site Sign ____
Multiple Occupancy & Tenancy Sign ____ Sign for Non-Conforming Use ____
Roof Sign ____ Sign for Non-Profit Institution ____
Functional Sign ____ Sign for Service Station ____
Window Sign ____ Window Sign ____
Other Special Sign ____ Explain _____

SIZE:

Length _____ Width _____ Square Feet _____
Height (Free Standing Only) _____
Light Source (Mercury Vapor, High Pressure Sodium, Etc.) _____

ATTACH THE FOLLOWING: Scaled sketch of sign - show dimensions, identify construction materials, locate lighting fixtures and show angles of illumination.

For Free Standing Signs: Provide scaled location plan of sign on site, provide dimensions, locate driveways and show landscaping.

For Building Mounted Signs: Provide scaled plan locating sign on building, provide dimensions, and show windows, doors, etc.

OTHER PERMITS REQUIRED:

Construction ____ Electrical ____

APPROVED FOR PERMIT

(Administrative Officer) DATE _____

DISAPPROVED FOR PERMIT

Reason: _____

(Administrative Officer) DATE _____

ZONING PERMIT FEES

§901. Fees

A. Every application for development shall be accompanied by a check payable to the Township of Medford in accordance with the following schedule:

17. Zoning Permit Fees	Application Charge
(a) 1 or 2 Family Dwelling Unit	\$100
(b) Multiple Dwelling Building	\$200
(c) Additions or rehabilitation of fences, Sheds, above ground pools or any Improvements requiring issuance of zoning permit	\$50
(d) Inground Pools (includes pool grading plan)	\$150
(e) Non-residential development authorized by Site Plan Approval	\$250
(f) Change of Tenant	\$75
(g) Sign and/or Refacing Permit	\$100

[NOTE: There are no escrow account charges for the above applications]