



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 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) copy of the survey/plot plan with **proposal drawn to scale with the distances marked to the property lines and the house**. **Note:** The survey must be a true and accurate representation of what currently exists and what is proposed. Homeowner must sign an affidavit on survey.

- _____ Completed Homeowners Association Courtesy Notice/Approval. (Must be signed by the Homeowners & Homeowners Association)

- _____ Completed Building & Lot Coverage Worksheet.

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

- _____ One (1) set of elevation drawings for additions, new dwellings, etc.

- _____ Appropriate Zoning Permit Fees. Check the fee schedule.

- _____ If the property has a **SEPTIC SYSTEM**, the proposed project must be submitted to the Burlington County Board of Health for review and approval.



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:



DEPARTMENT OF PLANNING & ZONING

**COURTESY NOTICE
FOR
HOMEOWNER ASSOCIATIONS**

The purpose of this notice is to provide information to Homeowners Associations regarding proposed development or construction applications within a planned development and/or sub-division to insure the application is consistent with all HOA deed restrictions, restrictive covenants and by-laws. The improvements may include accessory structures such as sheds, garages, pools, solar arrays, and fencing. Medford Township encourages all applicants to work with their respective Associations to insure the proposed project is permitted in their neighborhood.

This form is to be filled out by the Applicant as part of a complete application and approved by Homeowner Association when applicable.

Property Identification:

Applicant: _____
Owner, if not same as Applicant: _____
Address of Applicant: _____
Phone number or Email address of Applicant: _____
Address of Work Site: _____
Block and Lot number: _____

This property is subject to the rules/restrictions of the following Association(s)

Describe the proposed development/improvement:

Has the proposed improvement been reviewed with the Association? _____

Does the improvement involve the removal of trees? Y or N A) >2" _____ B) <4" _____

If a lake-front lot is involved, how close is the improvement to the lake? _____ feet.

Does the improvement involve an existing buffer/easement of any type? _____

Applicant Signature _____ **Print** _____ **Date** _____

Homeowner Association Representative _____ **Print** _____ **Date** _____



Building and Lot Coverage Worksheet

Department of Planning & Zoning

Block: _____ Lot: _____ Zoning District: _____

Acreage

Square Feet

1	Lot size (multiply acreage by 43,560 to get square feet)		
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BUILDING COVERAGE

Dimensions

Square Feet

Existing		Dimensions	Square Feet
2	House	_____	_____
3	Attached garage	_____	_____
4	Attached deck with roof OR Attached patio with roof	_____	_____
5	Other attached	_____	_____
6	Total existing building cover (add lines 2 thru 5)		[]
7	Total % of existing building cover (line 6 divided by square feet in line 1 multiply 100)		[]
Proposed Addition to House (Identify structure, e.g., addition, deck, attached garage, etc.)			
8	_____	_____	_____
9	_____	_____	_____
10			
11	Total proposed building cover (add lines 8 thru 10)		[]
12	Total Building Cover in square feet - existing and proposed (add line 6 plus line 11)		[]
13	Total % of Building Cover (line 12 divided by square feet in line 1 then multiply by 100)		[]
14	Total % Building coverage permitted (from Planning and Zoning Staff)		[]

LOT COVERAGE

Dimensions

Square Feet

Existing		Dimensions	Square Feet
15	Building cover from line 6		_____
16	Driveway (including stone, pavers, etc.)	_____	_____
17	Sidewalks, paver patios, etc.	_____	_____
18	Detached garage(s)	_____	_____
19	Detached Deck(s)	_____	_____
20	Shed(s) or other accessory buildings	_____	_____
21	Pools, including surrounding concrete deck	_____	_____
22	Other (Gazebos, etc)	_____	_____
23	Total existing lot cover (add lines 15 thru 22)		[]
24	Total % of existing lot cover (line 23 divided by square feet in line 1 then multiply by 100)		[]
Proposed (Identify structure, e.g., patio, driveway, pool, shed, garage, etc.).			
25	Building Cover from line 11		_____
26	_____	_____	_____
27	_____	_____	_____
28			
29	Total proposed lot cover (add lines 25 thru 28)		[]
30	Total cover in square feet - existing and proposed (add line 23 plus 29)		[]
31	Total % Lot cover (line 30 divided by square feet in line 1 then multiply by 100)		[]
32	Total % Lot coverage permitted (from Planning and Zoning Staff)		[]

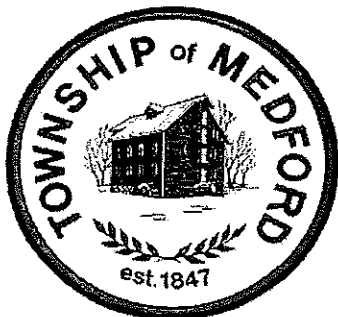
ZONING PERMIT FEES

§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]



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SEPTIC SYSTEM NOTICE

Per State Statute, any applicant with a septic system that is seeking a Zoning Permit for an addition, garage, shed, deck, pool, patio pavers, or any other structure on their property, or when proposing to finish a basement to include a new bathroom must first have their proposed project reviewed and approved by the Burlington County Health Department.

Applicants are to contact Sara Zuccarello of the Burlington County Health Department at (609)265-5568.

Ms. Zuccarello or one of her staff will review the proposed plans over the phone, and issue a letter within 24-48 hours. This letter is to be submitted with the Zoning Permit Application to Medford Township.