

Wayne Township
APPLICATION FOR ZONING PERMIT

Application is hereby made for a permit to erect or alter a structure which shall be located as shown on diagram and/or to use the premises for the purposes described herewith. The information which follows, together with location diagram is made part of this application by the undersigned. It is understood and agreed by this applicant that any error, misstatement or misrepresentation of material fact, either with or without intention on part of this application, such as might or would operate to cause a refusal of this application of any change in the locations, size or use of structure of land made subsequent to the issuance of this permit, without approval of the Zoning Office, shall constitute sufficient ground for the revocation of this permit.

Application — Application and Zoning Permit No. _____ Issued _____ Fee \$ _____

A. Location, Ownership and Present Use of Property

1. Project Location _____
2. Deed Owner _____
3. Owner's Address _____
4. Present Tenant _____ Does tenant have Owner's consent for proposed work? _____
5. Present Use of Structure (& No. of families) _____
6. Present Building, Describe _____
7. Present Use of Land _____
8. Site is located in _____ Zoning District as shown on ZONING MAP.

B. Proposed Use of Structure and/or Land

1. Type of Work: NEW STRUCTURE ADDITION ALTERATION MOBILE HOME
CHANGE OF USE SIGN OTHER _____
2. Proposed Use of Structure (and No. of families) _____
3. Proposed Use of Land _____
4. Description of Work _____
ASSESSMENT MAP NO. _____ COST ESTIMATE \$ _____

C. Applicant

1. Name of Applicant _____
2. Address of Applicant _____
3. Owner, Lessee, or authorized agent for owner of subject property _____
4. Applicant's Signature _____ Date _____
Phone Number _____ Mail Permit: Yes No

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FOR OFFICE USE ONLY

D. Approval And Dates Of Action Taken:

1. Application Approved. Yes No (Date) _____ Zoning Officer _____
2. Reason for Denial of Application _____
3. Applies to Zoning and Hearing Board: Yes No _____(Date) Hearing Yes No _____(Date)
Type of action requested: Variance Appeal Special Use Interpretation
4. Board's decision: Granted Denied Date _____ ORDER: _____
5. Referred to Planning Commission Yes No _____(Date) Approved Yes No _____(Date)
APPROVED AS MEETING ZONING ORDINANCE _____ DATE _____

ZONING OFFICER, WAYNE TOWNSHIP

Remarks _____

NOTE: Certificate of Compliance will be required upon completion of work. (No fee)

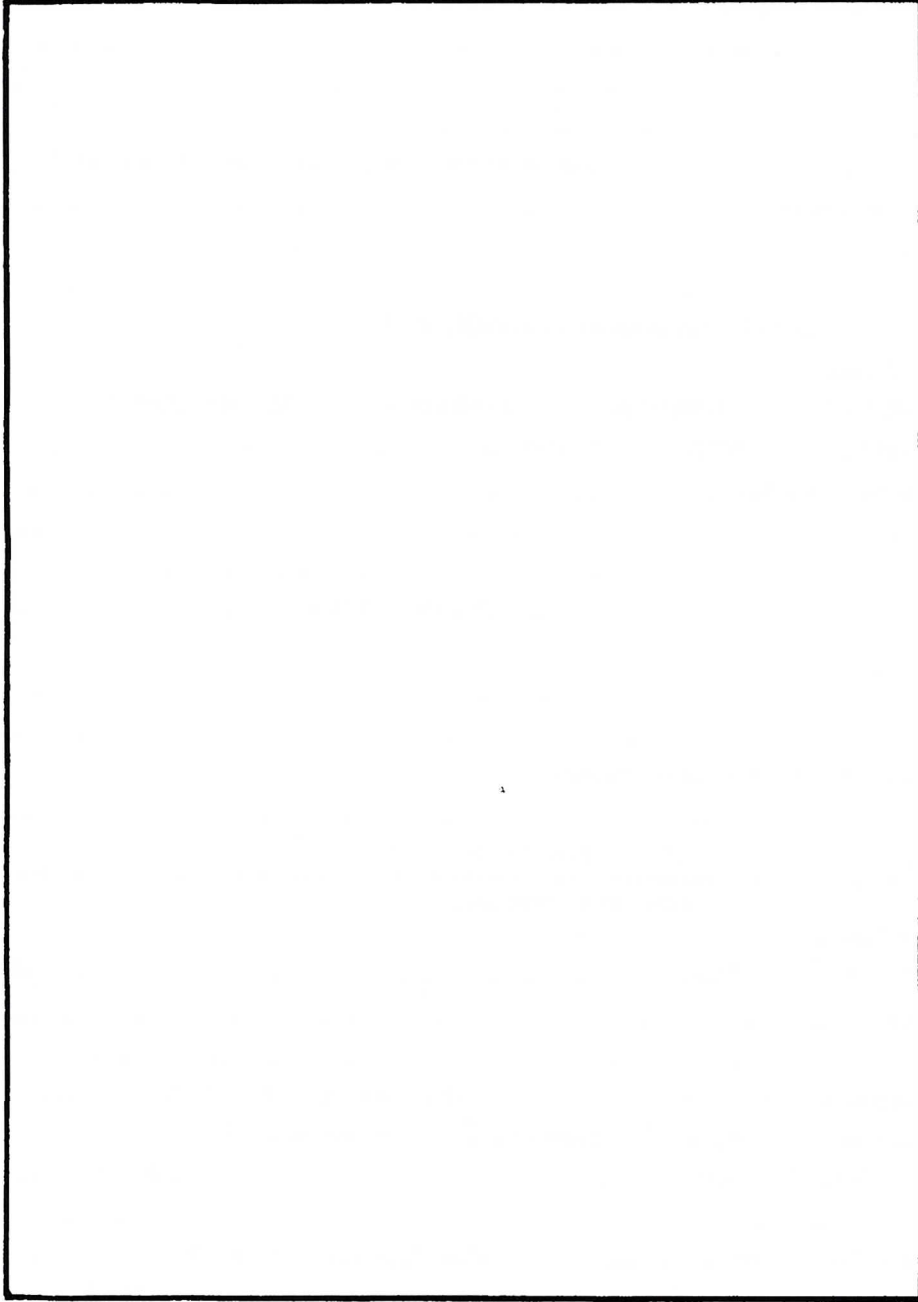
This permit applies to zoning only and shall not relieve applicant from obtaining such other permits as may be required by law.

Zoning Permit shall expire within two (2) years from date of issuance provided that work is begun within six (6) months of issuance.
If work is not begun, permit shall expire within six (6) months from date of issuance.

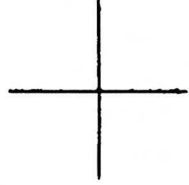
I WILL HAVE THE STRUCTURE BUILT AND LOCATED IN ACCORDANCE WITH THE DIMENSIONS SHOWN ON THE SKETCH BELOW.

SIGNED _____

STREET FRONTING THE PROPERTY



SHOW NORTH PT.



NOTE: The Zoning Office is NOT responsible for any property dimensions shown on this sketch; establishment of property lines is the responsibility of the owner and/or his agent.

- If the property has been surveyed, state name of surveyor _____
- If a civil engineer has been employed, state his name _____
- If an architect has been employed, state his name _____
- If a contractor has been employed, state his name _____