

BLOCK \_\_\_\_\_ LOT \_\_\_\_\_ SITE ADDRESS \_\_\_\_\_ PERMIT NO. \_\_\_\_\_

FENCE PERMIT NO. \_\_\_\_\_

### TOWNSHIP OF STAFFORD ZONING PERMIT APPLICATION

Proposed Work Site: \_\_\_\_\_

Name of Owner: \_\_\_\_\_ Owner's Telephone #: \_\_\_\_\_

Owner's Mailing Address: \_\_\_\_\_

Name of Applicant: \_\_\_\_\_ Applicant's Telephone #: \_\_\_\_\_

Applicant's Mailing Address: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Telephone #: \_\_\_\_\_ E-mail: \_\_\_\_\_

Existing Use: \_\_\_\_\_ Proposed Use: \_\_\_\_\_

Description of Work: \_\_\_\_\_

**THE FOLLOWING MUST BE COMPLETED IF THE PROPOSED WORK SITE IS LOCATED IN THE TOWNSHIP'S SPECIAL FLOOD HAZARD AREA**

Existing First Floor Elevation: \_\_\_\_\_ (A Zones) Proposed First Floor Elevation: \_\_\_\_\_ (A Zones)

Existing Lowest Structural Member: \_\_\_\_\_ (V Zones) Proposed Lowest Structural Member: \_\_\_\_\_ (V Zones)

Cost of Work (Labor & Materials): \$ \_\_\_\_\_ Fair Market Value of Principal Structure (TO BE FILLED OUT BY STAFF): \$ \_\_\_\_\_

**SIGNATURE OF APPLICANT:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**\*\*\*FOR OFFICE USE ONLY\*\*\***

ZONING PERMIT FEE \$25.00 CHECK/MO \_\_\_\_\_

ZONING RE-INSPECTION \$15.00 CHECK/MO \_\_\_\_\_ DATE \_\_\_\_\_

FENCING PERMIT FEE \$25.00 CHECK/MO \_\_\_\_\_

CURB RE-INSPECTION \$45.00 CHECK/MO \_\_\_\_\_ DATE \_\_\_\_\_

GRADING: PERMIT FEE \$25.00 CHECK/MO \_\_\_\_\_

PERFORMANCE GUARANTEE - CURB \_\_\_\_\_ CHECK/MO \_\_\_\_\_ DATE \_\_\_\_\_

INSPECTION FEE \$450.00 CHECK/MO \_\_\_\_\_

PERFORMANCE GUARANTEE - TREES \_\_\_\_\_ CHECK/MO \_\_\_\_\_ DATE \_\_\_\_\_

INSPECTION # \_\_\_\_\_

TREE RE-INSPECTION FEE \_\_\_\_\_ CHECK/MO \_\_\_\_\_ DATE \_\_\_\_\_

CURBING: PERMIT FEE \$15.00 CHECK/MO \_\_\_\_\_

INSPECTION FEE \$75.00 CHECK/MO \_\_\_\_\_

INSPECTION # \_\_\_\_\_