



Zoning Permit Application

10 Reeve Ave
Haddon Township, NJ 08108
856-833-6266

PLEASE NOTE: INCOMPLETE APPLICATION WILL NOT BE PROCESSED UNTIL ALL REQUIRED INFORMATION IS SUPPLIED. Application Fee: \$50 Cash or Check (made payable to Haddon Township).

Property Information:

Block: _____ Lot: _____ Zoning District: _____ Is this a corner lot? Yes or No
Street Address: _____

Applicant/Owner Information

Property Owner Name: _____
Property Owner Address (If different from above): _____
Applicant/Owner Phone: _____
Applicant/Owner Email: _____

Contractor Information:

Name: _____
Address: _____
Email: _____

Nature of Work:

Requested Use/Proposed Work (include dimensions of any proposed structure(s)): _____

Submitted by applicant: Survey (11"x17" minimum): _____ Grading Plan: _____

Proposed Setbacks:

Front Yard: _____ Rear Yard: _____ Side Yard (Right): _____ Side Yard (Left): _____

Fences: Proposed Height: _____ Does the fence enclose a pool? Yes or No

Outside Agency Approvals (attach copies):

_____ Haddon Township Planning/Zoning Board _____ NJDEP
_____ Camden County Planning Board _____ NJDOT

