

**TOWNSHIP OF WASHINGTON, BERGEN COUNTY  
LAND DEVELOPMENT  
ZONING/ENGINEERING APPLICATION**

**Zoning Approval Only:**

**Applies to but not limited to:**

Fences  
Gazebos  
Sheds  
Deck/Patio  
A/C Compressor  
Above Ground Pools  
Hot Tub or Spa  
Portico

**Zoning/Engineering Approval:**

**Applies to but not limited to:**

Major Landscape Design  
Additions  
Add-a-Levels  
Dormers  
Porches  
Garages  
New Homes  
In-Ground or Semi in-ground pools

Driveway Expansions  
Retaining Walls

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**Fees: (All checks made out to: "Township of Washington")**

**Zoning Only: \$50 application fee**

**Zoning/Engineering: \$50 application fee/ \$1000 engineering escrow fee  
(2 separate checks required)**

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1. Completely fill out, sign and date the attached form.
  2. Attach a recent, accurate copy of your survey or plot plan marking it up with any addition, deletions or corrections made since the date of the survey. Make sure that the scale is accurate (no enlarged or reduced copies). **PLEASE NOTE: IF THE PLANS SUBMITTED ARE LARGER THAN 8.5" X 14", 2 COPIES NEED TO BE SUBMITTED BY APPLICANT.**
    - a. Draw in and highlight the construction that you are applying for.
    - b. Label the dimensions of the structure.
    - c. Label the distances from all structures (new and old, to your front, sides and rear property lines.)
    - d. Be sure to write YOUR name, address and property Block and Lot number on the survey.
  3. Obtain a notice from the Township of Washington Tax Collector indicating that the taxes on the lot are paid in full.

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**For Zoning/Engineering Applications Only:**

1. Applications must be reviewed by the Township Engineer for review and approval. For engineering questions, please call Mr. Michael Ritchie, 201-845-8500. Upon review, a letter will be sent to the applicant and the Zoning Officer.
2. Submit an application for a Soil Movement Permit with the Township Clerk. The fee for this will be calculated by the Township Engineer. Make a copy of your application packet.
3. Please include one (raised) sealed copy of architectural plans for the work being proposed.

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**For All Applications:**

1. Leave the entire packet (application, tax form, check(s), survey) with the Zoning Secretary on the 2<sup>nd</sup> floor of the Municipal Building. Hours: Monday through Thursday 8:30AM-12:30PM; 201-666-1463.
2. All applications are submitted to the Township Zoning Officer, James Tucker, for review. Upon approval or denial, a letter will be sent to the applicant's home address.
3. If approved, you must bring your approval letter from the Zoning Officer to the Building Department to apply for any permits that may be needed for your project. The Building Department is located on the lower level of the Municipal Building. Hours: Monday through Thursday 9:30AM-4:30PM. Phone: 201-666-0462.

**Township of Washington**  
**Land Development (ZONING) Application**  
**Zoning/Engineering Approval**

Date of Submission \_\_\_\_\_ BLOCK \_\_\_\_\_ LOT \_\_\_\_\_

You may visit the Township web site at: <http://www.twpofwashington.us/> and click on the ORDINANCES link to be connected to the GENERAL CODE E-CODE ONLINE LIBRARY to obtain more information about Zoning Regulations for the Township.

**A. OWNER/APPLICANT INFORMATION**

Owner Name: \_\_\_\_\_

Owner Address: \_\_\_\_\_

Zip \_\_\_\_\_

Owner Telephone: \_\_\_\_\_

Applicant Name: \_\_\_\_\_

*If the applicant is not the property owner, the owner must complete the authorization form on the last page of the application.*

Relationship to Property Owner \_\_\_\_\_

Applicant Address: \_\_\_\_\_

Zip \_\_\_\_\_

Applicant Telephone: \_\_\_\_\_

**B. TYPE OF APPLICATION** (check all that apply)

- Addition \_\_\_\_\_ Dimensions (L x W x H) \_\_\_\_\_
- Deck \_\_\_\_\_ Dimensions (L x W) \_\_\_\_\_
- Shed \_\_\_\_\_ Dimensions (L x W x H) \_\_\_\_\_
- Swimming Pool \_\_\_\_\_ Whirlpool/Hot tub \_\_\_\_\_
- Fence (privacy) \_\_\_\_\_ Height \_\_\_\_\_ Ft.
- Fence (for pool barrier) \_\_\_\_\_ Height \_\_\_\_\_ Ft.
- Other (please specify) \_\_\_\_\_

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**C. SITE INFORMATION (fill in all blanks)**

Tax Block and Lot \_\_\_\_\_

Height of existing structure \_\_\_\_\_

Height of Proposed structure \_\_\_\_\_

Is this a corner lot? (Circle one) YES NO

**D.** Are there any overhangs on the new structure? YES NO  
If yes, please indicate size and draw them on survey.

**E.** Has there ever been a variance granted on this property before? YES NO  
If yes, please explain and attach copy of variance to this application.

**F.** Are there any deed restrictions or covenants affecting this application? YES NO  
If yes, attach a copy of the Deed.

**G.** Is this property part of a subdivision? YES NO  
If yes, attach a copy of the resolution.

**H.** What percentage range of the existing structure will be demolished?  
0 % to 15% \_\_\_\_\_ 16 % to 30% \_\_\_\_\_ 31 % to 50% \_\_\_\_\_

51 % to 70% \_\_\_\_\_ 71 % to 90% \_\_\_\_\_ 91 % to 100% \_\_\_\_\_

Enter the **specific numeric percentage** of the structure being demolished on this line  
\_\_\_\_\_ %.

I, \_\_\_\_\_ being of full age, hereby swear that all of the  
(Print Applicant Name)  
information I have provided in the above application, and the attached survey and/or plans are  
true and correct to the best of my knowledge.

\_\_\_\_\_  
Print Applicant Name

\_\_\_\_\_  
Print Owner(s) Name

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Signature of Owner

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**AUTHORIZATION OF OWNER(S)**

If anyone other than the owner(s) of the property is making this application, the following authorization must be executed.

**TO the ZONING ENGINEER:**

\_\_\_\_\_ is hereby authorized to make the attached application to the Zoning Engineer.

\_\_\_\_\_  
Print Owner(s) Name

\_\_\_\_\_  
Signature of Owner

\_\_\_\_\_  
Date