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

Zoning Approval Only:
Applies to but not limited to:
A/C Compressor
Uncovered Deck
Fences
Gazebos
Above Ground Pools
Hot Tub or Spa
Sheds
Solar Panels

Zoning/Engineering Approval:
Applies to but not limited to:
Major Landscape Design
Additions
Add-a-Levels
Dormers
Patio
Porches
Portico
In-Ground or Semi in-ground pools

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)

1. Completely fill out, sign and date the attached form.
2. OBTAIN A NOTICE FROM THE TOWNSHIP OF WASHINGTON TAX COLLECTOR INDICATING TAXES ON THE LOT ARE PAID IN FULL. ATTACH TO APPLICATION.
3. 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”, 4 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.

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

For All Applications:
1. Leave the entire packet (application, tax form, check(s), survey with the Zoning Secretary on the 2nd floor of the Municipal Building. Hours: Monday 1:30 p.m. – 4:30 p.m., Thursday – Friday 8:30 a.m. – 4:30 p.m., telephone: 201-666-1463.
2. All applications are submitted to the Township Zoning Officer 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 located on the lower level of the Municipal Building. Hours: Monday through Friday 9:30 a.m. – 2:30 p.m. Phone: 201-666-0462.
Township of Washington
Land Development (ZONING) Application
Zoning/Engineering Approval

Date of Submission: _______________________
BLOCK: ______________  LOT: _____________

You may visit the Township website 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: __________________________________

Applicant Address: __________________________________

______________________Zip ____________

Applicant Telephone: ____________________________

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: ____________________________

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. (no more than 6’, no less than 4’)

Other (please specify)______________________________
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 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
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