

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

Zoning Approval Only:

Applies, but is not limited to:

A/C Compressor (New/Relocated)
Uncovered Deck
Fences
Gazebos/Pergolas
Above Ground Pools
Hot Tub or Spa
Sheds
Solar Panels

Zoning/Engineering Approval:

Applies, but is not limited to:

Major Landscape Design
Additions
Add-a-Levels
Dormers
Patio
Porches
Portico
In-Ground or Semi in-ground pools

New Homes
Garages
Driveway Expansions
Retaining Walls
Covered Decks
Sidewalks

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 and include with application. This can be done by either visiting the Tax Collector window on the second floor or via email to taxcollector@twpofwashington.us.
3. Attach 3 recent, accurate copies of your survey, marking any additions, deletions or corrections made since the date of the survey. Make sure that the scale is accurate (no enlarged or reduced copies).
 - 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 block and lot numbers on the survey.
4. Please submit 3 sets of plans with the application. The details on the plans are to include site changes, grading changes, and elevation calculations. If plans are completed by architect/engineer, they **MUST** be signed AND have the architect/engineer's raised seal on them. **PLEASE NOTE: These are NOT construction detail plans.**

For All Applications:

1. Leave the entire packet (application, tax form, check(s), surveys, plans) 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. Phone: 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 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 8:30 a.m. – 4:30 p.m. Phone: 201-666-0462.

For Zoning/Engineering Applications:

1. Applications must be reviewed by the engineer for review and approval. Upon review, a letter will be sent to the Construction Official and applicant.
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 signed, sealed set of work site specific pool construction detail plans if the depth of the pool is not indicated on the site plan.

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ADDRESS: _____ BLOCK: _____ LOT: _____

A. OWNER/APPLICANT INFORMATION:

Owner Name: _____

Owner Address: _____

_____ Zip _____

Owner Telephone: _____

Owner Email: _____

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: _____

Applicant Email: _____

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

___ Addition Dimensions (LxWxH): _____

___ Shed Dimensions (LxWxH): _____

___ Deck Dimensions (LxW): _____

___ Above Ground Swimming Pool ___ In-ground Swimming Pool ___ Hot Tub

___ Driveway Expansion ___ Driveway Repaving ___ Driveway Replacement

___ Fence (Privacy) Height: _____ Ft.

___ Fence (Pool) Height: _____ Ft. (no less than 4', no more than 6')

___ Other (Please Specify): _____

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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:

I, _____, authorize _____
(Print Owner Name) (Print Applicant Name)

to make the attached application to the Zoning Officer and Township Engineer on my behalf.

Print Owner(s) Name

Signature of Owner

Date

CERTIFICATION OF APPLICANT

I, _____ being of full age, hereby swear that all of the information I have provided
(Print Applicant Name)

in the above application, and the attached survey and/or plans are true and correct to the best of my knowledge.

Print Applicant Name

Signature of Applicant

Date