

## Bridgewater Township

### APPLICATION FOR ZONING BOARD OF APPEALS REVIEW

Variance      Administrative Appeal      Interpretation      Sign Exception      Other: \_\_\_\_\_

**A Completed Application will contain all the information required per the Zoning Ordinance, Article 17.0 (Zoning Board of Appeals).**

Name of Proposed Development/Project _____	
Common Description of Property & Address (if issued) _____	
Applicant's Name(s) _____	
Phone/Fax numbers _____	Email _____
Address _____ City: _____ Zip: _____	

Legal Description: _____	Attached _____	Included on Plan/Survey _____	Tax Parcel ID Number(s): _____
Existing Zoning: _____	Land Acreage: _____	Existing Use(s): _____	
<b>ATTACHED: Letter summarizing the request and responding to the applicable review criteria found in articles 13, 16 or 17.</b>			

Firm(s) or Individuals(s) who prepared the plan or survey drawing.	1. Name: _____ Phone: _____ Email _____ 2. Address: _____ City: _____ State: _____ Zip: _____ Contact Person: _____ Phone _____
Legal Owner(s) of Property. All persons having legal interest in the property must sign this application. Attach a separate sheet if more space is needed.	1. Name: _____ Phone: _____ Address: _____ City: _____ State: _____ Zip: _____ Signature: _____ Interest in Property: _____ 2. Name: _____ Phone: _____ Address: _____ City: _____ State: _____ Zip: _____ Signature: _____ Interest in Property: _____

I do hereby swear that all the statements, signatures, descriptions, exhibits submitted on or with this application are true and accurate to the best of my knowledge and that I am authorized to file this application and act on behalf of all the owners of the property.	
_____ Signature of Applicant	_____ Date
Office Use Only	
Date Received: _____	By: _____ Fee Paid: _____
ZBA Case#: _____	Hearing Date: _____ Notice Publication/Mailing Date: _____ Date of Action: _____
ZBA Action:    Approved	Approved with Conditions: _____ Denied: _____