

**APPLICATION FOR ZONING CERTIFICATE
WASHINGTON TOWNSHIP**

The undersigned applies for a Zoning Certificate for the following use, said certificate to be issued on the basis of the information contained within this Application. The Applicant hereby certifies that all information and attachments to this application are true and correct. The applicant is required, in addition to the information requested on this form, to submit plans, drawn to scale, showing the actual existing buildings on the lot, and the location and dimensions of the proposed buildings, alterations, or other improvements.

1. Name of Applicant: _____
 Mailing Address: _____
 Phone Number: Home: _____ Business: _____
 E-mail: _____
2. Locational Description: Subdivision Name _____
 Section: _____ Township: _____ Range: _____
(If not located in a recorded subdivision, attach legal description)
3. Existing Use: _____
4. Present Zoning District: _____
5. Proposed Use: New Construction: _____ Remodeling: _____
 Accessory Building: _____ Sign: _____ Pond: _____
 Residence: _____ No. of Units: _____
 Other (explain): _____
(If proposed use requires Site Plan Reviews, secure and complete the appropriate form).
6. Method of sewage disposal: _____
7. Percent of lot coverage: _____
8. Lot Width: _____ Lot Area: _____
9. Residential Floor Area: _____ sq. ft.
10. Building Height: Stories: _____ Feet: _____
11. Yard Dimensions: Front: _____ Rear: _____ Each side: _____
12. Accessory Buildings: Height: _____ Area in Square Feet: _____ Fence _____
13. Number of off-street parking spaces provided: _____
14. Value of Project: \$ _____
15. On a separate sheet, attach a list of other supplemental requirements or conditions that will be met, or explain any points you feel need clarification.

(DATE)

(APPLICANT'S SIGNATURE)

NOTE: This certificate shall be void if work is not started within one year.

* Footer Inspection: As Zoning Inspector of Washington Township, I hereby certify that a Footer or Site Location Inspection was conducted on the above described property at _____, on _____.
(time of day) (date)

The location was () was not () in compliance with the Washington Township Zoning Resolution.

(Date)

(Zoning Inspector)