



PERMIT NUMBER

**ZONING REVIEW**  
**BOROUGH OF NORTHVALE**  
201-767-3330 Ext. 1013

Date: \_\_\_\_\_

Applicant's Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Address: \_\_\_\_\_ Block \_\_\_\_\_

City, State, Zip \_\_\_\_\_ Lot \_\_\_\_\_

Contractor's Name: \_\_\_\_\_

Address: \_\_\_\_\_ Phone #: \_\_\_\_\_

Project Address: \_\_\_\_\_

Description of Project: \_\_\_\_\_

Dimensions: \_\_\_\_\_

Decks and Porches – covered? YES \_\_\_\_\_ NO \_\_\_\_\_

Will you be moving soil? YES \_\_\_\_\_ NO \_\_\_\_\_

Within flood zone or wetlands? YES \_\_\_\_\_ NO \_\_\_\_\_

- |                                     |   |
|-------------------------------------|---|
| APPLICATION MUST BE ACCOMPANIED BY: |   |
| 1)                                  | SITE PLANS OR PROPERTY SURVEY SHOWING PROJECT WITH ALL DIMENSIONS |
| 2)                                  | CODE REQUIREMENT REPORT FOR THE APPROPRIATE ZONE                  |

Signature of applicant: \_\_\_\_\_

<b>OFFICE USE ONLY</b>		
Permit: ISSUED _____	DENIED _____	Date: _____
Reason for denial (if applicable) _____		
_____		
Fee: \$50.00	Check # _____	Cash _____ Zoning Official _____