



**APPLICATION FOR A
RESIDENTIAL ZONING
CERTIFICATE**

FOR OFFICE USE ONLY APPLICATION # _____ DATE _____

SUBJECT PROPERTY

Street Address _____

Parcel ID Number _____

Subdivision _____ Lot # _____ Zoning District _____

APPLICANT

PROPERTY OWNER

Name _____

Address _____

Phone Number _____

Email _____

TYPE OF CONSTRUCTION

___ New Single Family

___ Pool, Above Ground

___ Solar Panels

___ New Two Family

___ Pool, In Ground

___ Other

___ Addition to Home

___ Detached Garage

___ Deck

___ Shed

DESCRIPTION

Describe construction in detail including square footage, height, and intended use

Applicant Signature

Date

Hamilton Township Zoning Authority

Date _____ Approved ___ Denied ___

Application Requirements

- Filing Fee
- Site plan drawn to scale including:
 - o Location of all buildings, existing and proposed
 - o Front, side and rear yard setbacks, as applicable for new construction
 - o Lot area with dimensions noted
 - o Location of fence for all pools

- Any other relevant plans

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Minimums per Zoning Code

Road Frontage	_____	_____
Width at building line	_____	_____
Front setback	_____	_____
Side setbacks	_____	_____
Rear setbacks	_____	_____

Zoning Fee _____ Cash _____ Credit Card Authorization #:
 Receipt Number _____ Check _____

Date sent to Building Department _____
 Date sent to Applicant _____

Inspection Dates
 Setback _____
 Final _____

Additional Comments

