

# BOROUGH OF WHARTON

Housing & Zoning Official  
Property Maintenance  
Enforcement  
Kevin Lewthwaite



10 Robert Street  
Wharton, NJ 07885  
Tel: 973-361-8444 Ext. 2721  
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## ZONING REVIEW APPLICATION / PERMIT

Property Address: \_\_\_\_\_ Block & Lot: \_\_\_\_\_

Mark the Proposed Change:

- Change of Use
- Construction / Addition - Residential: \_\_\_\_\_ Commercial/Industrial: \_\_\_\_\_
- Change of Commercial/Industrial Occupancy

\*\*\*\*Description of Use Change, Occupant / Name Change, Construction Change (from & to):

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Applicant Name (print): \_\_\_\_\_ Circle: Owner or Rep.

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

Phone No.: \_\_\_\_\_ Fax No.: \_\_\_\_\_ Email: \_\_\_\_\_

Emergency contact person number and address: \_\_\_\_\_

**For Commercial and Industrial Applications:**

\*Previous use of the property: \_\_\_\_\_

\* Proposed use: \_\_\_\_\_

\*Has the property been subject to previous Planning or Board of Adjustment approvals: \_\_\_\_\_

\*Are licenses required to conduct this Business (if so, what is required)? \_\_\_\_\_

\*Number of employees? \_\_\_\_\_ Number of parking spaces provided for applicants use? \_\_\_\_\_

\*Hours of operation/ days per week: \_\_\_\_\_

The applicant and /or owner certifies that the information contained in this application is true and correct. If the Zoning Officer determines that any of the information contained in this application is untrue or inaccurate, the permit can be revoked. If revoked the applicant may be forced to cease operations and can be required to vacate the premises.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Fee Paid: \_\_\_\_\_

**Non-Refundable Fee Schedule:**

**RESIDENTIAL: 35.00 \* COMMERCIAL < 3,000 SQ.FT.: \$100.00**

**\*COMMERCIAL > 3,000 SQ.FT.: \$200.00**

Offices located at 10 Robert Street, Wharton, New Jersey

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