

BOROUGH OF BEACH HAVEN  
ZONING DEPARTMENT

300 Engleside Avenue  
Beach Haven, NJ, 08008  
Phone: 609-492-0909  
Fax: 609-492-6382

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

Permit #: \_\_\_\_\_

Application for:

Zoning: \$ \_\_\_\_\_

Piling: \$ \_\_\_\_\_

Sign: \$ \_\_\_\_\_

Curb/Sidewalk: \$ \_\_\_\_\_

Fence: \$ \_\_\_\_\_

Impervious Coverage: \$ \_\_\_\_\_

Tent: \$ \_\_\_\_\_

Engineering Fees: \$ \_\_\_\_\_

Bond: \$ \_\_\_\_\_

Other: \_\_\_\_\_ \$ \_\_\_\_\_

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

Lot: \_\_\_\_\_

Zone: \_\_\_\_\_

Use on Property: Single Family Two Family Multi Family Other: \_\_\_\_\_

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

Work Site Location: \_\_\_\_\_

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

Description of Work: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Zoning Officer/Date

Check # \_\_\_\_\_ Cash \_\_\_\_\_ Amt. Rec'd. \_\_\_\_\_ Date: \_\_\_\_\_ Initials \_\_\_\_\_