

Zoning Permit Application

Property Addre	ess:					
Property Owne	er(s):					
Owner's Addre	ess:					
Owner's Telep	hone Number:					
Name of Appli	cant(s):					
Applicant's Te	lephone Numbe	r:				
	the Property (MFamily	fark One): Duplex	Multi-Fam	ily	Commercial	
Proposed Use	or Project (attac	h additional sheets	if needed):			
Signature of O	wner (s) if owner	er is NOT the appli	cant:			
Signature of A	pplicant(s):					
Date of Applic	ation:					
		Please prov	ride the Following:			
For Residentia	al Properties					
 Drawing or Photographs of the Proposed Construction An Accurate Survey of the property showing the Location of the Proposed Construction and the Distance to all property lines and Height of Structure. \$45.00 check made payable to Edgewood Borough for residential applications. 						
For Commerc	ial Properties					
0	\$7500 L.					
APPRO	OVED	DENIEI	D	Date:_		
Zoning Officer	:					
Notes:						