Borough of Avon-By-The-Sea
MINOR LAND USE APPLICATION

The undersigned applicant hereby applies for zoning approval for the following to be issued on the basis of the representations contained herein, all which applicant swears to be true.

Property: Block: _____ Lot: _____ Street Address: _____

Owner: Name _____
Address _____
Email Address _____
Tel# _____ Cell _____ Work _____
E-mail: _____

Applicant: Name (Print) _____
Title _____
Address _____
Email Address _____
Tel# _____ Cell _____ Work _____
E-mail: _____

Proposed Use: (check appropriate item)
Zone ___ Addition ___ New Home ___ Subdivision: Major ___ Minor ___ Pool ___ Deck ___ Patio ___.
Other: (specify) _____

ATTACH A COPY OF SURVEY & A SKETCH OF PROPOSAL
(Survey to Include the following information)

Lot Size _____X_____ Lot sq. ft._____
Flood Zone_____
Base Flood Elevation_____ ft.

Existing Lot Coverage: (Building)

Existing Building –	sq. ft._____	%_____	Proposed sq. ft._____	%_____
Garage –	sq. ft._____	%_____	Proposed sq. ft._____	%_____
Porch –	sq. ft._____	%_____	Proposed sq. ft._____	%_____

Impervious Coverage – (Decks, Walkways, Patios, Stairs, Pools etc.)
Existing sq. ft. _____ %_____
Proposed sq. ft. _____ %_____

Total Lot Coverage (Building, Garage, Porch, Impervious)
Existing sq. ft._____ %_____
Proposed sq. ft._____ %_____

Location of Structure: Front Yard Setback _____feet – if a corner lot _____ feet.
Front Yard Setback (Average on street)_____feet – if a corner lot_____feet.
Side Setbacks_____ Proposed_____
Rear Setbacks _____ Proposed_____

Property: Block: _____ Lot: _____ Street Address: _____

Distance from principal structure to accessory structure(s) _____ feet.

Description of Structure(s): Number of taxable unit's _____
Number of accessory structures _____

Principal Structure: Height (existing) _____ (proposed) _____
Stories (existing)_____ (proposed) _____

Description of property nonconformities:

_____
_____
_____

Date: _____

Signature of Applicant: _____ Title:_____

Based on the above application and statements which are made part thereof, the proposed usage is / is not found to be in accordance with the Land Use Ordinance of The Borough of Avon-By-The-Sea and is hereby:

Approved / Disapproved.

Date: _____ Zoning Official: _____

Comments / Explanations:

_____
_____
_____
_____
_____
_____
_____

Referral: To Building Dept.: ____ Planning Board: _____ Engineer: _____

Application Fee $50 Fee Paid: _____ Check #_____ Cash ____

Mailing Address: Borough of Avon
301 Main Street
Avon, NJ 07717

Zoning Official: Frank DiRoma
Phone # 732-502-4510, Ext. 230
E-mail: zoning@avonbytheseanj.com

Final Zoning Inspection: Date: _____ Signature: _____