

**BRUNSWICK HILLS TOWNSHIP ZONING APPLICATION**

Date of Application \_\_\_\_\_ **Zoning Certificate** \_\_\_\_\_

Application for:

- Informal/Concept Site Plan Review       Non-Conforming Use Review
- Final Site Plan Approval                       Other
- Review

Please print all information below:

Name of Owner: \_\_\_\_\_

Owner's Address: \_\_\_\_\_

Name of Applicant: \_\_\_\_\_

Applicant's Address: \_\_\_\_\_

Phone Number Where Applicant Can Be Reached:

Home \_\_\_\_\_

Office \_\_\_\_\_ Cell \_\_\_\_\_

Location of Property: \_\_\_\_\_

Permanent Parcel No. (*required*) \_\_\_\_\_

Present Zoning: \_\_\_\_\_

Provision of Zoning Resolution Involved: \_\_\_\_\_

Reason for this Application: \_\_\_\_\_

Signature of Owner: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

The application will not be accepted until all data specified is completed and submitted herewith to the Zoning Inspector.

---

**OFFICIAL USE ONLY**

**Date Fee Received** \_\_\_\_\_ **Fee: \$300.00** **Check#** \_\_\_\_\_ **Cash** \_\_\_\_\_

**Date of Meeting:** \_\_\_\_\_ **Recommendation to Trustees: Approval** \_\_\_\_\_

**Disapproval** \_\_\_\_\_ **Trustees Meeting Date:** \_\_\_\_\_

**Zoning Inspector:** \_\_\_\_\_ **Date:** \_\_\_\_\_

