

# BOARD OF ZONING APPEALS APPLICATION

## City of Morristown



Prior to a **variance or use on review** request being placed on the Board of Zoning Appeals Agenda, the applicant must furnish to the Department of Community Development and Planning the following information:

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

**Property information:** Address: \_\_\_\_\_

County Tax Map: \_\_\_\_\_ Group: \_\_\_\_\_ Parcel(s) \_\_\_\_\_

Current zoning: \_\_\_\_\_ Parcel size: \_\_\_\_\_ City/U.G.B. \_\_\_\_\_

Existing Use: \_\_\_\_\_ Proposed Use: \_\_\_\_\_

**1) Name of Property Owner:** \_\_\_\_\_

Address: \_\_\_\_\_ City/State/Zip \_\_\_\_\_

Contact Number: \_\_\_\_\_ Email \_\_\_\_\_

**2) Name of Applicant (if different):** \_\_\_\_\_

Address: \_\_\_\_\_ City/State/Zip \_\_\_\_\_

Contact Number: \_\_\_\_\_ Email \_\_\_\_\_

**3) Name of Agent (if applicable):** \_\_\_\_\_

Address: \_\_\_\_\_ City/State/Zip \_\_\_\_\_

Contact Number: \_\_\_\_\_ Email \_\_\_\_\_

**4) Nature of Request:** (please circle)

a) Use on review (\$50.00 Fee)

b) Variance (\$50.00 Fee) ▪ Amount/type of variance requested: \_\_\_\_\_

Reason for request: (1) property shape (2) topographic conditions (3) Other: \_\_\_\_\_

c) Appeal \_\_\_\_\_

d) Other Requests: \_\_\_\_\_

**5) Submit site plans, surveys, special fees or other items as required for review.**

**6) Property Owner Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

This application will not be accepted unless all information is complete. If a question is not applicable, please draw a line through the space provided or mark "n/a" (not applicable).