



**BOROUGH OF FRANKLIN**  
**Zoning Office**  
 46 Main Street  
 Franklin, NJ 07416

Joseph Setticase, Zoning Officer  
 Phone: (973) 827-9280 x113  
 Fax: (973) 827-0716

**APPLICATION FOR ZONING PERMIT**

Date:	Block:	Lot:	Zone:
Name of Applicant:		Location of Premises:	
Address of Applicant:			
Street	Town	Zip Code	Phone #
Name and Address of Owners(if different from Applicant):			
Street	Town	Zip Code	Phone #
Description of Proposed Use or Structure (what is it you want to do and/or build?):			

**\*Please attach a survey showing the size of the lot, bounding streets, size, type and location of existing and proposed structures and distances to all property lines. A letter of approval from you homeowners associations is required, if applicable. Failure to provide all requested documents will halt the processing of this application and it will be deemed incomplete.**

Prior Approvals on Subject Premises:	Planning Board: _____ Zoning Board: _____	Date of Approval: _____ Date of Approval: _____
Contractor or Person Doing Work: (If different than Owner)		
Address:		
Street	Town	Zip code Phone#

Application Fee MUST accompany application:                      Paid \_\_\_\_\_ Check# \_\_\_\_\_

***I hereby give permission for Franklin Borough Zoning Officer to come upon and inspect these premises with respect to this application.***

Date: \_\_\_\_\_ Print Name: \_\_\_\_\_ Signature: \_\_\_\_\_

ZONING PERMIT NUMBER \_\_\_\_\_

This is to certify that the above described premises, together with any buildings thereon, are used or proposed to be used for, or as: \_\_\_\_\_

- |  |  |
|--|--|
| And is a: <ul style="list-style-type: none"> <li><input type="checkbox"/> Use Permitted by Ordinance</li> <li><input type="checkbox"/> Use Permitted by Variance approved on _____</li> <li><input type="checkbox"/> Subject to any condition attached to the grant thereof.</li> <li><input type="checkbox"/> Valid non-conforming use (according to NJSA 40:55D-68)</li> </ul> | Special Conditions:<br>_____<br>_____<br>_____ |
|--|--|

Zoning Officer Signature

Date

**NOTE: This document is NOT a Building Permit! A Building Permit MUST be obtained prior to the commencement of any construction!**

CHANGE OF OCCUPANCY/CHANGE OF USE  
APPLICATION  
NON-RESIDENTIAL ONLY

Name of Business: \_\_\_\_\_

Main Contact: \_\_\_\_\_ Phone #: \_\_\_\_\_

Describe current use of the property:  
\_\_\_\_\_  
\_\_\_\_\_

Describe proposed use of property:  
\_\_\_\_\_  
\_\_\_\_\_

Has the property been used for other purposes in the past?  
\_\_\_\_\_  
\_\_\_\_\_

If Yes describe these uses:  
\_\_\_\_\_  
\_\_\_\_\_

Area of space to be occupied by application (sf): \_\_\_\_\_

**Parking:**

Number of spaces provided on site: \_\_\_\_\_

Number of spaces required for applicant's use: \_\_\_\_\_

Number of spaces provided for by non-standard means: (describe location of parking):  
\_\_\_\_\_  
\_\_\_\_\_

Describe current use of all floor area in building (provide diagram with total area of each space.):  
\_\_\_\_\_  
\_\_\_\_\_

Hours of Operation: \_\_\_\_\_

Number of Employees: Full-time: \_\_\_\_\_ Part-time: \_\_\_\_\_

**Signs:**

Describe existing approved signs and size: \_\_\_\_\_  
\_\_\_\_\_

Are any new signs proposed?: \_\_\_\_\_

Location: \_\_\_\_\_ Dimensions: \_\_\_\_\_

Type: \_\_\_\_\_ Height: \_\_\_\_\_

Illuminated: Yes: \_\_\_\_\_ No: \_\_\_\_\_ Describe: \_\_\_\_\_