

Notified Date _____
Owner _____
Applicant _____

INVOICE# _____
Amt Pd. _____ Date _____
CK# _____ Cash _____

City of Woodbury

33 Delaware Street, Woodbury, NJ 08096

(856) 845-1300 ext. 132

jleech@woodbury.nj.us

Zoning Verification Application

Site Address: _____ Block# _____ Lot# _____

Property Owner: _____

Address: _____

Telephone: _____ Cell: _____ Email: _____

I _____ owner/authorized agent for owner:

_____ Will be the operator of the proposed business as described below.

_____ give permission for proposed tenant to use this building and or property to operate the business described below and to seek approvals or building permits if needed.

Owner Signature _____

Applicant's Name (if different from owner): _____

Address: _____

Telephone: _____ Cell: _____ Fax: _____

Email: _____

Prior Use of Building/Property: _____

Proposed Business/Use: _____

Describe Proposed Business | Use: _____

Signed: _____ Date: _____

Please include \$20 Zoning Verification Fee in the form of cash, check or money order made payable to "City of Woodbury"

Zoning Officer _____ Approved _____ Denied _____

Comments _____