

TOWNSHIP OF BLAIRSTOWN
COUNTY OF WARREN – STATE OF NEW JERSEY
BLAIRSTOWN, NJ 07825

Office of Zoning Official

908-362-6897 ext 231

ZONING APPLICATION FEE: \$75.00

NEW BUSINESS - CHANGE OF USE FORM

Block: _____ Site Address: _____ Date: _____

Lot: _____ Zone District: _____ Lot Size: _____

Applicant: _____ Phone (Home): _____

Fax Number: _____ Phone (Office): _____

On Behalf of: _____

Name of Previous Owner/Tenant: _____

Description of **previous** use: _____

Description of **proposed** new use: _____

Approx. square footage of bldg. or space for new use: _____

Has a variance been granted on the lot ___ Yes ___ No If so, when _____

Is a sign permit required for the new use? ___ Yes (obtain permit) ___ No

Applications for new business or change of use must be accompanied by floor plan sketch, business name and cover letter describing operations.

I herby certify that the above information is true to the best of my knowledge

Applicant Signature

Date Paid: _____

Check #: _____

Based on the information, this application is:

___ Denied ___ *Conditionally Approved ___ Approved Permit No. _____

*Conditional Approval based on concurrent findings of the Construction Official

Zoning Officer

Date Deemed Complete