



**BOROUGH OF PARK RIDGE
CONSTRUCTION OFFICE**

55 Park Avenue
Park Ridge, NJ 07656
Tel: 201-391-5224
Fax: 201-391-7130

ZONING PERMIT

Zone: _____ Block: _____ Lot: _____ Corner/Interior Lot _____ Date _____

Sign Deck Fence Fence for Pool Shed Pool Addition/New Construction Other

TYPE OF DWELLING:

Single Detached One Family Home Multi-Family Two Family Owner Occupied
 Two Family Non-Owner Occupied Tenant Commercial

Applicant _____ Tel. No. _____

Work Site Location _____

Owner _____

Contractor _____

Address _____ Phone Number _____

Description of Work _____

Bulk Schedule	Existing	Proposed
Lot Area (feet)		
Lot Width (feet)		
Street Frontage (feet)		
Lot Depth (feet)		
Front Yard (feet)		
Side Yard (feet)		
Dwelling Width %		
Rear yard (feet)		
Building Height (feet)		
Floor Area Ratio		
Impervious Coverage %		
Building Coverage %		

Applicant's Signature

Date

FOR OFFICE USE ONLY:

Fee: \$ _____

Cash/Check #: _____

Approved () Denied () Reason _____

Zoning Officer's Signature _____ Date _____

FEES: RESIDENTIAL/COMMERCIAL = \$50 NEW CONSTRUCTION = \$100