CITY OF VENTNOR CITY 6201 ATLANTIC AVENUE VENTNOR, NEW JERSEY 08406 (609) 823-7987 (609) 823-7966 FAX

www.ventnorcity.org

ZONING PERMIT APPLICATION

VC CODE 197-7

Owner:	rner: Phone #		
Address of Property:			
Contractor Name:	Phone #	Phone #	
Contractor License #	Expiration Da	ite:	
	<u>SURVEY</u> SHOWING LOCATION THIS APPLICATION FOR THE F		
	CIFY HEIGHT: Front \Box 4' 50% Open		
	Side \Box	Rear	
SHED PERMIT (\$40.00)	SPECIFY SIZE OF SHED:		
☐ CONCRETE (\$40.00)	SPECIFY LOT COVERAGE ON S	<u>URVEY</u>	
DUMPSTER (\$50.00) **(valid for 30 days)**	CONTAINER SUPPLIER NAME:PHONE#_		
	FIRE DEPARTMENT FAXED (609)		
15 day extension	☐ POLICE DEPARTMENT COPIED		
PODS (\$50.00) **valid for 48	hrs weekdays and 72 hrs on weekends)**		
TYPE OF PAYMENT: CASH:	CHECK:		
COMMENTS:			
	III.OME C. A CNECINO. CONC		
	JIMMIE G. AGNESINO, CONS	TRUCTION OFFICIAL	