



# APPLICATION TO APPEAL ZONING OFFICER'S DECISION

## SUBMISSION ITEMS & APPLICATION

1. TWO (2) COLLATED SETS OF THE FOLLOWING:
  - Completed Application to Appeal the Zoning Officer's Decision (one with original signature).
  - Zoning Department / Zoning Review Officer's denial letter.
  - Photographs of subject property and/or areas of proposed changes
  - If applicable:
    - **Original survey** showing existing conditions of the property.
    - **Proposed survey** showing the proposed buildings and structures drawn to scale with all dimensions for the proposed changes and all set backs from all property lines (front, rear and side yard setbacks).
    - **Architectural Plans:**
      - Must have the seal of a licensed New Jersey Architect, and be folded to fit in mailing envelope
      - **ALL FLOOR PLANS – must include detailed dimensions.**
      - **ALL ELEVATIONS – must include detailed dimensions for heights and widths.**
      - **Areas of changes/alterations should be clearly delineated.**
2. Fees as required by Ordinance: (Please make checks payable to the Township of Livingston.)  
**All fees collected are non-refundable.**
  - Administrative Appeal – \$200.00
3. One (1) completed *Application for Development*, which will provide certification from the Tax Collector that no taxes or assessments for local improvements are due or delinquent.
4. One (1) completed *Request for Certified List of Property Owners*, in order to obtain list of all property owners within 200 feet of the property, with cash or check in the amount of \$10.00. Please make checks payable to the Township of Livingston.
5. One (1) completed *Permission to Inspect* form in order for the members of the Zoning Board or any Township officials of the Township of Livingston to visit the property in question.
6. For corporations, partnerships or limited liability companies the following submission items must be submitted in addition to the above:
  - One (1) completed *10% Owners List / Ownership Disclosure Statement*.
  - Escrow deposit in the amount of \$1,500.00 – Checks payable to the Township of Livingston
  - W9 Form



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Once all of the mandatory submission items have been given to the Planning Department and the application has been deemed complete, the applicant will be notified by email and scheduled for the next available hearing date.

## **ITEMS REQUIRED ONCE HEARING DATE IS SET**

1. Ten (10) additional copies of the application, surveys, plans, and accompanying documents. All copies must be **collated and organized** to be distributed to the Board members.
2. Notice of Hearing must be placed in the West Essex Tribune **ten (10) days** prior to hearing date. Return notarized Affidavit of Publication (issued by the West Essex Tribune with copy of Public Notice article) to the Planning office for the file.
3. Provide all property owners within 200 feet of property with the ***Zoning Board of Adjustment Notice of Hearing*** letter via hand delivery or via Certified US Mail. Complete and **notarize Affidavit of Service of Notice** including signatures of all property owners that received the letter via hand delivery and/or provide original receipts of all Certified US Mail recipients. Form can be notarized at Town Hall; provide Planning office a copy of notice for the file.

## **ESCROW DEPOSITS**

***(Required for corporations, partnerships or limited liability companies)***

In accordance with the Ordinances of the Township of Livingston (§170-52B), escrow accounts are established to cover the cost of professional services including but not limited to planning, engineering, legal, meeting fees incurred (i.e. court reporter) and other expenses associated with the review of submitted materials. If additional sums are deemed necessary, the Board Administrator will notify the Applicant of the required additional amount. Sums not utilized in the application process shall be returned upon written request by the Applicant. ***A W-9 Form (Request for Taxpayer Identification Number and Certification) must be completed and submitted with any required escrow deposits.***

## **ATTACHMENTS:**

- Application to Appeal Zoning Officer's Decision
- Application for Development (Certification of Taxes and Assessments)
- Request for Certified List of Property Owners within 200'
- Permission to Inspect



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|                                |                           |
|--------------------------------|---------------------------|
| <b>DATE OF SUBMISSION</b>      | <b>APPLICATION NUMBER</b> |
| <b>PLANNING DEPT FEES PAID</b> | <b>FOR OFFICE USE</b>     |

**BLOCK** \_\_\_\_\_ **LOT(S)** \_\_\_\_\_ **ZONE** \_\_\_\_\_

**PROPERTY ADDRESS** \_\_\_\_\_

**APPLICANT** \_\_\_\_\_ **TELEPHONE** \_\_\_\_\_

**ADDRESS** \_\_\_\_\_

(if different from above) \_\_\_\_\_ **EMAIL** \_\_\_\_\_

**PROPERTY OWNER** (if different from above) \_\_\_\_\_

**ADDRESS** \_\_\_\_\_

**PROFESSIONAL(S) REPRESENTING APPLICANT** \_\_\_\_\_

**ADDRESS** \_\_\_\_\_

**EMAIL** \_\_\_\_\_ **TELEPHONE** \_\_\_\_\_

**BRIEF NARRATIVE OF PROPOSED APPEAL** \_\_\_\_\_

**DESCRIPTION OF PREVIOUS DECISIONS BY THE ZONING BOARD** \_\_\_\_\_

(or attach copies of decisions. If none, then state NONE.): \_\_\_\_\_

\_\_\_\_\_

|  |  |
|--|--|
| <p>I hereby affirm that all of the above statement and statements contained in the papers submitted herewith are true.</p> <p>_____<br/><i>Signature of Applicant</i>                      <i>Date</i></p> <p>_____<br/><i>Address</i></p> | <p>I hereby affirm that I am the owner of the premises involved in this application and that I consent to the filing of the application.</p> <p>_____<br/><i>Signature of Owner</i>                      <i>Date</i></p> <p>_____<br/><i>Address</i></p> |
|--|--|

**PUBLIC NOTICES ARE A JURISDICTIONAL REQUIREMENT. THE APPLICATION CANNOT BE HEARD UNTIL PUBLICATION AND PUBLIC NOTICE IS PROPERLY SERVED AND PROOF OF SAID NOTICE IS RECEIVED.**