



RESIDENTIAL

Zoning Permit Application

Minimum requirements

A. COMPLETED ZONING APPLICATION

1. FILL IN Entire Zoning Permit
2. Application must be signed by BOTH the applicant and the owner of the property (landlord, homeowner, management company, etc.)
3. Briefly describe the work that is being conducted (#5)

B. THREE (3) COPIES OFFICIAL PROPERTY SURVEY/KEY MAP

1. Survey must be drawn to scale- not reduced or enlarged
2. Survey must indicate property as it presently exists, showing all updates or improvements.
3. Survey must show all proposed work, also drawn to scale, indicating all dimensions and measurements

C. THREE (3) COPIES OF REQUIRED CONSTRUCTION DRAWINGS.

1. Construction drawings must correspond with what is on the property survey or key map
2. Two (2) copies will stamped and returned to the applicant to be submitted to the Building Department for construction permits.

D. RESIDENTIAL

*** All Additions, sunrooms, enclosed porch, new SFD, ETC. ***

1. All of the Above
2. FAR (Floor Area Ratio) Certification Sheet - signed & sealed

E. PAYMENT IS DUE AT TIME OF RECEIPT OF APPLICATION

1. Check, Money Order, or Cash (EXACT CHANGE)
2. NO DEBIT OR CHARGE CARDS will be accepted.

Additional Information that may be needed:

- * Zoning or Planning Board Resolutions
- * Final Compliance letters
- * Engineering reports
- * Approvals from any outside agencies (Somerset Soil, etc.)

Incomplete Applications **WILL NOT** Be accepted. If you have any questions, you may reach our office at (908) 276-5802. Thank you



Borough of Kenilworth

567 Boulevard
Kenilworth , New Jersey 07033

ZONING PERMIT

APPL. NO: _____

DATE: _____

FEE: _____

BLOCK: _____ LOT: _____

PERMIT FEE \$50.00

****COMPLETE APPLICATIONS MUST INCLUDE PLANS IN ACCORDANCE WITH THE INSTRUCTION SHEET AND APPLICABLE FEES.****

TYPE OF APPLICATION

- | | |
|---|---|
| <input type="checkbox"/> Minor Residential Alteration | <input type="checkbox"/> Alterations to Multi-Family and/or |
| <input type="checkbox"/> Residential Alteration | <input type="checkbox"/> Non-Residential structures ; SIGNS* |
| <input type="checkbox"/> New Single Family Structure | <input type="checkbox"/> New Non-Residential Structure Const. |
| <input type="checkbox"/> New Multi Family Structure | <input type="checkbox"/> Certificate of Non-Conformity |
| <input type="checkbox"/> New Two Family Structure | <input type="checkbox"/> Change of Occupancy |
| <input type="checkbox"/> Other : Describe | |

**ALL SIGN PROPOSALS REQUIRE THE ADDITIONAL SIGN FORM TO BE COMPLETED & SUBMITTED WITH THIS FORM.
PLEASE PRINT CLEARLY**

1. Applicant's Name: _____ Tel. No. _____

Applicant's Address: _____

Email Address: _____

2. Property Owner's Name _____ Tel. No. _____

Property Owner's Address: _____

3. Location of property for which Zoning Permit is desired: Zone _____

Street Address: _____

4. Use of Property: Residential []; Commercial []; Office []; Industrial []; Other []

Describe present use: _____

Describe proposed use: _____

Describe proposed construction, alterations, additions or changed at the subject site: _____



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5. Is a change of occupancy or tenancy involved in this application: Yes [] No []
If yes, describe _____

6. Has the subject premises been the subject of prior application to the Zoning Board of Adjustments or Planning Board to the applicant's knowledge. Yes [] No []
If Yes, state date: _____ Board _____ Resolution # _____
Disposition of Application: _____

ALL APPLICATIONS MUST BE SIGNED:

Applicant Signature Print Name Applicant

Property Owner Signature or Designated Agent Print Name (Owner)

=====

OFFICE USE ONLY:

Based on the information submitted and the requirements of the Borough Zoning Ordinance, your application for Zoning Permit is hereby:

APPROVED: _____ DENIED: _____

Comments on Decision: _____

Zoning Officer

Date



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Total Square Footage of Lot
Measure all structure within property line:

- Existing square footage of House
- Including: Porches, steps and attached garages
- Square footage of Detached Garage
- Square footage of shed
- Square footage of Air Conditioning Units
- Square footage of Driveway
- Square footage of all Walkways
- Square footage of all Patios (Mas Black)
- Any other Structure on the property
- Square footage of proposed new construction

<u>DIMENSION</u>	<u>Square Footage</u>
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

(B)

Total Square footage of structures
 (Ratio of structure to lot (B divided by A) LOT COVERAGE PERCENTAGE: B/A x100+Percentage Imperv, Coverag

 _____ % (C)

The undersigned states that he/she completed the above building coverage calculations and represents that the figures are accurate. This may be signed by the homeowner, a Professional Engineer or Registered Architect. Seal required if by Professional Engineer or Architect.

Signature: _____ Date: _____

Print Name: _____



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RESIDENTIAL FLOOR AREA RATIO CERTIFICATION

Effective November 1, 2015, The Borough of Kenilworth Council amend the Residential Zoning Requirements, Section 23:E-10 for FAR (Floor area ratio) and lot coverage. AS per those amendments the following information table and certification is required to be submitted with the Zoning permit Applications for single family home improvements: (Residential Floor Area Ratio shall be calculated utilizing the exterior wall dimensions of each floor of the structure; minus any two (2) story interior areas such as open foyers, balconies, atriums, etc. where no second-floor space exists)

	Existing Floor Area	Proposed Total Floor Area (Existing Plus New)
First Floor	_____	_____
Second Floor	_____	_____
Habitable Attic	_____	_____
Garage	_____	_____
Total Floor Area	_____	_____
Lot Size	_____	_____
Floor Area Ratio is: Total Floor Area/Lot Size		_____

Applicant: _____ Address: _____

Block No.: _____ Lot #(s) _____ Zone: _____ Max. Allowable FAR: _____

Certification

The undersigned certifies that the floor areas set forth above and the overall floor area ratio have been verified by me as accurate. I recognize that the Zoning Officer is relying upon the accuracy of said information as part of the Zoning Permit process.

*****Must be signed and sealed by a N.J Licensed Engineered or Architect.***

Print Name Clearly

Signature

Date: _____

License #: _____



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RESIDENTIAL ZONES BULK STANDARDS

STANDARD	R-5	R-5A	R-6
Minimum lot size	5,000 SF	5,000 SF ¹ 7,000 SF ²	6,000 SF
Minimum lot width	50'	50'	60'
Front yard setback	25' ³ 23' ⁴	25' 23'	25' 23'
One side yard setback	5'	5'	8'
Two side setbacks	20% of width	20% of width	25% of width
Rear yard setback	20'	20'	20'
Maximum height	35' 2.5 stories	35' 2.5 stories	35' 2.5 stories
Maximum building cover	50%	50%	50%
Maximum impervious cover	75%	75%	75%
Floor area ratio	.75	.75	.75

NOTES

¹ Single Family homes

² Two family homes

³ First floor

⁴ Second floor