BOROUGH OF MANTOLOKING

OCEAN COUNTY

P.O. BOX 247 202 DOWNER AVENUE MANTOLOKING, NJ 08738 www.mantoloking.org



NEW JERSEY

TELEPHONE NO. General (732) 475-6983 Fax (732) 475-7671 Construction (732) 475-7261 Fax (732) 475-7601

Permit #(s)	
Date:	

ZONING PERMIT APPLICATION - NEW DWELLING/ RAISING OR ELEVATING EXISTING

Block # Lot #	Work Site Address	
Property Owner's Name:		
Permanent Address:		
Telephone Number:		
Contractor Name & Phone Contractor Address:	e:	
PROPOSED CHANGES	/ ADDITIONS / ALTERATIONS TO PROPERTY:	
• New Home (\$250.00)	Raise/ Elevation (\$250.00)	
Please Check All That App	ly to the Above:	
 Deck/ Stairs Air Conditioning / Gene 	erator	
DESCRIPTION OF		
PLEASE NOT	IE: The Zoning Official has ten (10) working (business) days to approve a Zon You will be contacted when the review is complete. ALL ZONING PERMITS EXPIRE 1 YEAR AFTER DATE OF APPROVAL	ing Permit.
	FOR OFFICE USE ONLY	
	Permit Approved Permit Denied	
Zoning Officer	Date	
	\$ Cash □ check # \$ Cash □ check #	
Received by	Date	