



Application No. _____ **Date of Submission:** _____

Filing Fee \$ _____ **45 Day Date:** _____

A. Applicant: _____

Name

Street Address

Telephone #

City & State

Zip Code

Email

B. Previous Board Appeals of Activity:

NO _____ YES _____ If Yes Date: _____

Type of Variance: _____

Approved: _____ Denied: _____

C. Property Location: _____

Street Address

Block(s) #

Lot(s) #

Zone District



D. Description of proposed work and required variances:

E. Does Applicant own adjoining property? _____

F. Deed Restrictions, Covenants, or Easements? YES _____ NO _____
(If yes, attach copy)

G. Arguments for Variance: (To be completed by Applicant)
Undue hardship consideration:



H. Affidavit of Applicant:

State of New Jersey
County of Ocean

_____ of full age being dully sworn accord to law, on oath deposes and says that all of the above statements and statements contained in the papers submitted herewith are true.

Sworn and Subscribed to
Before me this _____ day
Of _____

Notary: _____

Applicant's Signature

Applicant's Signature

Owner's Signature

Owner's Signature

Attorney: _____

Name

Street Address

Telephone #

City & State

Zip Code

Email

I. Authorization of Owner:

(If anyone other than the above owner is making this application, the following authorization must be executed)

To the approving Board of the Township of Brick:

_____ is hereby authorized to make the within application.

Dated: _____

Owner's Signature