



**Borough of Mountainside**  
1385 Route 22 Mountainside NJ 07092  
TEL: 908.232.2409 FAX: 908.232.6902  
EMAIL: [PlanningSec@mountainside-nj.com](mailto:PlanningSec@mountainside-nj.com)

Board of Adjustment

---

APPLICATION FOR LAND USE

DATE: \_\_\_\_\_

APPLICANT NAME: \_\_\_\_\_ TEL: \_\_\_\_\_

APPLICANT ADDRESS: \_\_\_\_\_

\_\_\_\_\_ ZIP: \_\_\_\_\_

APPLICANT EMAIL: \_\_\_\_\_

BUILDING OR LAND OWNER: \_\_\_\_\_ TEL: \_\_\_\_\_

OWNER ADDRESS: \_\_\_\_\_

\_\_\_\_\_ ZIP: \_\_\_\_\_

ADDRESS OF SITE FOR PROPOSED \_\_\_\_\_

BLOCK: \_\_\_\_\_ LOT: \_\_\_\_\_ ZONE \_\_\_\_\_

PRESENT USE OF PROPERTY (describe) \_\_\_\_\_

\_\_\_\_\_

TYPE OF SERVICE OR PRODUCT (describe) \_\_\_\_\_

\_\_\_\_\_

PLEASE CHECK THE PURPOSE(S) OF THE APPLICATION:

- |  |  |
|--|--|
| <input type="checkbox"/> Preliminary Site Plan   | <input type="checkbox"/> Sketch Plot             |
| <input type="checkbox"/> Final Site Plan         | <input type="checkbox"/> Alterations/Renovations |
| <input type="checkbox"/> Preliminary Subdivision | <input type="checkbox"/> Repairs                 |
| <input type="checkbox"/> Final Subdivision       | <input type="checkbox"/> Sign                    |
| <input type="checkbox"/> Addition                | <input type="checkbox"/> Other (describe) _____  |
| <input type="checkbox"/> Change of Tenancy       | _____  |

COMPLETE THE FOLLOWING (if applicable):

Number of Parking:

Existing \_\_\_\_\_ Proposed \_\_\_\_\_ Required by Ordinance \_\_\_\_\_

Allotted to Tenant for Change of Tenancy \_\_\_\_\_

Number of Proposed Employees \_\_\_\_\_

Square Footage of Building \_\_\_\_\_

Square Footage of Area to be Occupied \_\_\_\_\_

Square Footage of Lot \_\_\_\_\_

Hours of Operation \_\_\_\_\_

CERTIFICATIONS:

APPLICANT – I certify that the foregoing statements and the materials submitted are true. I further certify that I am:

\_\_\_\_\_ The individual applicant AND owner of the property.

\_\_\_\_\_ The individual applicant with permission to apply from the property owner.

\_\_\_\_\_ An Officer of the Corporate Applicant authorized to sign the application for the Corporation. \*

\_\_\_\_\_ A General Partner of the Partnership Applicant authorized to sign the application for the Partnership.\*

\* (If the applicant is a corporation, an authorized corporate office MUST sign. If the applicant is a partnership, a general partner MUST sign.)

Sworn to and subscribed before me this

\_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

\_\_\_\_\_  
NOTARY PUBLIC

\_\_\_\_\_  
APPLICANT

Stamp	Seal
-------	------

PROPERTY OWNER – I certify that I am the Owner of the Property which is the subject of this application, that I have authorized the applicant to make this application and that I agree to be bound by the application, the representations made and the decisions in the same manner as if I were the applicant. (If the applicant is a corporation, an authorized corporate office MUST sign. If the applicant is a partnership, a general partner MUST sign.)

Sworn to and subscribed before me this

\_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

\_\_\_\_\_  
NOTARY PUBLIC

\_\_\_\_\_  
APPLICANT

Stamp	Seal
-------	------

Note: The law requires that the conditions set forth in the following three, Sections 1, 2, and 3, must be established before a variance can be granted. Answers to these sections MUST be completed in full.

Explain in detail wherein your case conforms to the following requirements.

1. That the strict application of the provisions of the Zoning Ordinance would result in the practical difficulties or unnecessary hardships inconsistent with its general purpose and intent.

State fully wherein your case conforms to the following requirements.

2. That there are exceptional circumstances or conditions applicable to the property involved or to the intended use or development of the property that do not apply generally to other property in the same zone or neighborhood.

State wherein your case satisfies these requirements.

3. That the granting of a variance will not be materially detrimental to the public welfare or injuries to the property or improvements in such zone or neighborhood in which the property is located.

Note: The Board of Adjustment is required to make a written finding of facts from the showing applicant makes that the three above enumerated conditions exist and in addition thereto must find that the granting of such variance will not be contrary to the objectives of the Land Use Ordinance.

DESCRIPTION OF PROPOSED STRUCTURE OR USE:

PREMISES AFFECTED KNOWN AS \_\_\_\_\_

\_\_\_\_\_

APPLICANT \_\_\_\_\_ ADDRESS \_\_\_\_\_

OWNER \_\_\_\_\_ ADDRESS \_\_\_\_\_

LESSEE \_\_\_\_\_ ADDRESS \_\_\_\_\_

- ZONE
- |                                      |  |
|--------------------------------------|--|
| <input type="checkbox"/> RESIDENCE 1 | <input type="checkbox"/> BUSINESS              |
| <input type="checkbox"/> RESIDENCE 2 | <input type="checkbox"/> LIMITED INDUSTRIAL    |
| <input type="checkbox"/> RESIDENCE 3 | <input type="checkbox"/> RESTRICTED COMMERCIAL |
|                                      | <input type="checkbox"/> OFFICE BUILDING       |

LAST PREVIOUS OCCUPANCY \_\_\_\_\_

SIZE OF LOT \_\_\_\_\_

SIZE OF BUILDING (INCLUDE EXISTING AND PROPOSED:

MAXIMUM LENGTH \_\_\_\_\_ MAXIMUM WIDTH \_\_\_\_\_

NO. OF STORIES \_\_\_\_\_ MAXIMUM HEIGHT ABOVE GRADE \_\_\_\_\_

PERCENTAGE OF LOT OCCUPIED BY BUILDINGS (EXISTING AND PROPOSED) \_\_\_\_\_%

SETBACK FROM FRONT PROPERTY LINE \_\_\_\_\_ FT

SETBACK FROM SIDE PROPERTY LINE (if corner lot) \_\_\_\_\_ FT

PREVAILING SETBACK OF ADJOINING BUILDINGS WITHIN BLOCK \_\_\_\_\_ FT

HAS THERE BEEN ANY PREVIOUS APPEAL INVOLVING THESE PREMISES? \_\_\_\_\_

IF SO, STATE CHARACTER OF APPEAL AND DATE OF DISPOSITION:

## CHECKLIST

1. \_\_\_\_\_ HAVE YOU ANSWERED IN FULL THE 3 SECTIONS ON PAGES 4 & 5?
2. \_\_\_\_\_ HAVE YOU FILLED IN ALL THE INFORMATION REQUIRED ON PAGES 5 & 6?
3. \_\_\_\_\_ HAVE AFFIDAVITS BEEN PROPERLY SIGNED AND NOTARIZED?
4. \_\_\_\_\_ HAVE YOU PROPERLY NOTIFIED ALL PROPERTY OWNERS WITHIN 200 FEET AS PROVIDED TO YOU?
5. \_\_\_\_\_ HAVE YOU PAID YOUR HEARING FEES?
6. \_\_\_\_\_ HAVE YOU PREPARED 15 COPIES OF THE PLANS AS APPROVED BY THE LAND USE ADMINISTRATOR AND ANY OTHER MATERIALS IN SUPPORT OF YOUR CASE TO BE PROVIDED TO THE MEMBERS OF THE BOARD?

NOTE: Original Applications and list of property owners must be returned to the Board Secretary