

Department of Public Affairs

CONSTRUCTION OFFICIAL
CODE ENFORCEMENT AND OFFICE OF HOUSING INSPECTION
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COSMO A. CIRILLO
COMMISSIONER

THOMAS O'MALLEY
CONSTRUCTION OFFICIAL
ZONING OFFICER

ZONING INFORMATION REQUEST

MONEY ORDER/CASHIER'S CHECK ONLY \$50.00 PAYABLE TO THE TOWN OF WEST NEW YORK

MUST BE COMPLETED IN ITS ENTIRETY OR WILL BE REJECTED

PROPERTY ADDRESS IN QUESTION: _____

FLOOR NUMBER: _____ UNIT NUMBER: _____

CIRCLE ONE: RESIDENTIAL MIXED USE COMMERCIAL VACANT: YES or NO

WHAT IS PROPERTY CURRENTLY USED AS: _____

DOES THIS REQUEST INVOLVE A REFINANCING: () YES () NO

IF NOT, WHAT IS YOUR INTENDED USE FOR THIS PROPERTY: _____

APPLICANT'S NAME: (If an LLC, provide principal's name or same will be rejected)

NAME: _____

ADDRESS: _____

PHONE NUMBER: _____ EMAIL: _____

DATE: _____

SIGNATURE OF APPLICANT

PROPERTY OWNER NAME: (If an LLC, provide principal's name or same will be rejected)

NAME: _____

ADDRESS: _____

PHONE NUMBER: _____ EMAIL: _____

PROPERTY OWNER AUTHORIZATION:

ANYONE OTHER THAN THE PROPERTY OWNER MAKING THIS APPLICATION; THE FOLLOWING AUTHORIZATION MUST BE EXECUTED:

NAME OF DESIGNEE (PRINT NAME)

NAME OF DESIGNEE (PRINT NAME)

IS HEREBY AUTHORIZED TO MAKE THE AFOREMENTION INQUIRY ON MY BEHALF. I UNDERSTAND THAT A COPY OF THE DETERMINATION REGARDING THIS REQUEST WILL BE MAILED TO ME, AS WELL.

DATE

PROPERTY OWNER SIGNATURE

ZONING INFORMATION REQUEST

NOTES:
