

## Office of the Zoning Official

Borough of Runnemede 24 N. Black Horse Pike Runnemede, NJ 08078 Phone: (856) 939-2815

Permit #:		

## **Above Ground Pool Permit Application**

Fee: \$25.00

Worksite Address: _		Block:	Lot:
Name of Property C	wner:		Phone:
Address of Property	Owner		
City:			Zip:
Email:			
		? YesNo	
If No, Applicant's Na	ame:		
Address:			
City:	State:	Zip Code:	Phone:
A letter from the		is required granting he Property Owner	approval if the applicant i
Pool location mu	st be indicated o	n copy of survey	
Pool Dimensions	:		
Pool shall be inst	talled at a distand	ce of at least 5 feet fr	om each property line
Applicant's Signatur	e:		
Print Name:			Date:

[] Runne	This application has been examined to be in compliance with the Borough of mede's Zoning Ordinance.
[ ] Borou	This application is rejected because of non-compliance with the following sections of the gh of Runnemede's Zoning Ordinance:
[] of Run	This application has been examined and there are no applicable sections of the Borough nemede's Zoning Ordinance.
-	ed applications can be revised to comply with the Zoning Ordinance or you may apply to
the Zo	ning Board of Adjustment for relief of the Zoning Officer's decision. Contact the Zoning
Officer	at (856) 939-2815
Zoning	g Officer: Date:
Zoning	g District:
Planni	ng/Zoning Board Approval: