



**Office of the Zoning Official**

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

Permit #: \_\_\_\_\_

**Addition/Deck Permit Application**

**Fees:**

**\$25.00 Residential    \$50.00 Commercial**

Worksite Address: \_\_\_\_\_ Block: \_\_\_\_\_ Lot: \_\_\_\_\_

Name of Property Owner: \_\_\_\_\_ Phone: \_\_\_\_\_

Address of Property Owner \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email: \_\_\_\_\_

Is the Applicant the same as the owner? Yes \_\_\_\_\_ No \_\_\_\_\_

If No, Applicant's Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Phone: \_\_\_\_\_

**A letter from the Property Owner is required granting approval if the applicant is not the Property Owner**

**Set Backs: Front: \_\_\_\_\_ Left Side: \_\_\_\_\_ Right Side: \_\_\_\_\_ Rear: \_\_\_\_\_**

**Addition or Deck location must be indicated on copy of survey**

**Addition or Deck Height and Dimensions: \_\_\_\_\_**

**Addition or Deck Use Description: \_\_\_\_\_**

**Total Lot Coverage: \_\_\_\_\_ Total Impervious Coverage: \_\_\_\_\_ Percentage of Impervious Coverage: \_\_\_\_\_**

Applicant's Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_ Date: \_\_\_\_\_

[ ] This application has been examined to be in compliance with the Borough of Runnemede's Zoning Ordinance.

[ ] This application is rejected because of non-compliance with the following sections of the Borough of Runnemede's Zoning Ordinance: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

[ ] This application has been examined and there are no applicable sections of the Borough of Runnemede's Zoning Ordinance.

*Rejected applications can be revised to comply with the Zoning Ordinance or you may apply to the Zoning Board of Adjustment for relief of the Zoning Officer's decision. Contact the Zoning Officer at (856) 939-2815*

Zoning Officer: \_\_\_\_\_

Date: \_\_\_\_\_

Zoning District: \_\_\_\_\_

Planning/Zoning Board Approval: \_\_\_\_\_