

Borough of Roselle
Request for Zoning Determination

Date: _____

Property address of which determination is requested:

Block: _____

Lot: _____

Requested by:

Name: _____

Address: _____

Email Address _____

Specify:

Owner Buyer Realtor Contractor Other _____

Present use of Property: _____

Proposed use of Property: _____

Certification:

I hereby certify that I have provided this information in order to obtain a zoning determination and I am responsible for its accuracy.

Signature: _____ Date: _____

FOR OFFICE USE ONLY

Date received _____ Request No. _____

Zoning District _____ Fee paid \$ _____

Legal Description: Lot# _____ Block# _____

Determination:

Determination made by: _____ Date issued: _____

Administrative Officer Signature

*This form may also be used to request a determination of the legality of an existing nonconforming use.