



CAPE MAY CITY PERMIT

Date Received
Control #
Date Issued
Permit #

A. IDENTIFICATION—APPLICANT: COMPLETE ALL APPLICABLE INFORMATION.

Block _____ Lot _____ Zoning District _____
Work Site Location _____

Owner in Fee: _____ e-mail _____

Tel. _____ e-mail _____
Address _____ street _____ municipality _____ Tel. _____ zip code _____

Contractor: _____ e-mail _____
Address _____ e-mail _____

Contractor License No. or Builder Registration No. _____ Exp. Date _____

Home Improvement Contractor Registration No. or Cape May License No. _____

Federal Emp. ID No. _____ FAX: _____

PURSUANT TO CHAPTER 19 OF THE MUNICIPAL LAND USE LAW OF CAPE MAY CITY, A PERMIT IS REQUIRED FOR THE CONSTRUCTION OR INSTALLATION FOR THE FOLLOWING PROPOSED WORK.

A CURRENT SURVEY OF THE PROPERTY SHALL BE INCLUDED WITH THIS APPLICATION DELINEATING THE LOCATION OF THE PROPOSED BUILDINGS, STRUCTURES, OR ALTERATIONS.

TYPE OF WORK:

- FENCE
- CURBS, SIDEWALKS, DRIVEWAYS
- ACCESSORY STRUCTURES (UNDER 200 SQ. FT.)
- ROOFING & SIDING
- OTHER

Estimated Cost of Work: \$ _____

FEES (Office Use Only)

REMARKS (Office Use Only)

C. CERTIFICATION IN LIEU OF OATH

I hereby certify that I am the (agent of) owner of record and am authorized to make this application.

Sign here: _____

Print name here: _____

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

NOTE: IF CONSTRUCTION DOES NOT COMMENCE WITHIN ONE YEAR FROM DATE OF ISSUANCE, OR IF CONSTRUCTION CEASES FOR A PERIOD OF SIX MONTHS, THE PERMIT IS VOID

PAYMENTS (Office Use Only)

TOTAL \$ _____

CHECK # _____

CASH \$ _____

RECEIPT # _____

COLLECTED BY _____

ZONING APPROVAL _____

HPC APPROVAL _____

CONSTRUCTION OFFICIAL APPROVAL _____