

Application No. \_\_\_\_\_

Filed: \_\_\_\_\_

**BOARD OF ADJUSTMENT**  
***ZONING ORDINANCE***  
**CITY OF LINDEN**

**Appeal to Vary or Modify certain Provisions of the Zoning Ordinance.**

TO THE BOARD OF ADJUSTMENT:

Request is hereby made for permission

to: \_\_\_\_\_

contrary to the requirements of Sections

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

of the Zoning Ordinance,

upon the premises known as Block(s) \_\_\_\_\_ Lots \_\_\_\_\_

Linden, N.J. in accordance with the plans hereto attached.

The proposed building or use thereof is contrary to the Ordinance in the following particulars:  
(State Specifically)

1. \_\_\_\_\_.
2. \_\_\_\_\_.
3. \_\_\_\_\_.
4. \_\_\_\_\_.
5. \_\_\_\_\_.

The following is a description of the proposed building and premises:

1. Name of Owner: \_\_\_\_\_
2. Address of Owner: \_\_\_\_\_
3. Location of Premises: \_\_\_\_\_.
4. Zone District: \_\_\_\_\_
5. Use of Proposed Building and Premises: \_\_\_\_\_.
6. Size of Lot: \_\_\_\_\_
7. Size of Proposed Building:  
At Street Level: \_\_\_\_\_.  
Height: \_\_\_\_\_
8. Use of Existing Building and Premises: \_\_\_\_\_
9. Name of Lessee: \_\_\_\_\_.

Has the Building Department examined the plans for the proposed building, and refused a Building Permit? \_\_\_\_\_.

Has there been any previous appeal involving these premises? \_\_\_\_\_.

If so, state data of filing, character of appeal and disposition of same.

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The following arguments are urged in support of this appeal.

- 1.
- 2.
- 3.
- 4.
- 5.

Attached hereto and made a part of this appeal are submitted the following papers:  
(These papers must be submitted with the appeal)

1. A set of drawings, containing all necessary measurements and all features involved in this appeal;
2. A letter of authority, or power of attorney, in case the appeal is made by a person other than the actual owner of the property.

I hereby depose and say that all the above statements and the statements contained in the papers submitted herewith are true and correct.

Sworn to before me this \_\_\_\_\_  
day of \_\_\_\_\_, 2019

By: \_\_\_\_\_  
*Applicant*

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*Address*