



# CONSTRUCTION PERMIT

BOROUGH OF GLEN ROCK, N.J.

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

Permit Number: \_\_\_\_\_

## COMPLETE THE FOLLOWING:

A. IDENTIFICATION – APPLICANT: Complete all applicable information. Notify this office when changing contractors.

Block \_\_\_\_\_ Lot \_\_\_\_\_

Work Site Location \_\_\_\_\_

Owner Name \_\_\_\_\_ Address \_\_\_\_\_

Telephone (\_\_\_\_) \_\_\_\_\_

Contractor Name \_\_\_\_\_ Address \_\_\_\_\_

Telephone (\_\_\_\_) \_\_\_\_\_ Lic. Or Bldrs. Reg. No. \_\_\_\_\_

Federal Emp. Or SSN \_\_\_\_\_

B. SITE CHARACTERISTICS: [ ] Residential [ ] Commercial. Zone: \_\_\_\_\_

C. CERTIFICATION IN LIEU OF OATH

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

X \_\_\_\_\_  
Signature

D. TECHNICAL SITE DATA  
(Description of Work)

### TYPE OF WORK:

- [ ] Construction New
- [ ] Replace existing:
  - \* ( ) Driveway (Public)
  - \* ( ) Driveway Apron
  - \* ( ) Curb
  - \* ( ) Sidewalk (Public)
  - ( ) Sewer Connection
  - ( ) Other \_\_\_\_\_

NOTE: \* Requires form inspection by DPW

### FOR OFFICE USE ONLY

#### JOB SUMMARY

Plan Review:	<u>Date</u>	<u>Initial</u>
[ ] No Plans Req.	_____	_____
[ ] Survey	_____	_____
[ ] Site Plan	_____	_____
[ ] Other	_____	_____

Estimated Cost of Work:

\$ \_\_\_\_\_

Fee Assessed:

\$ \_\_\_\_\_

Minimum Fee  
\$40.00

Insp. for reset of  
walk \$20.00

Paid [ ] Cash

[ ] Check No. \_\_\_\_\_

Revenue No. \_\_\_\_\_

Collected by: \_\_\_\_\_

PERMIT RELEASE:

### FOR OFFICE USE ONLY

INSPECTIONS	Dates (Month/Day)		
	Failure	Approval	Initial
Type:			
Excavation	_____	_____	_____
Forms	_____	_____	_____
Gravel	_____	_____	_____
Pre-Pour	_____	_____	_____
Pre-Pave	_____	_____	_____
Connections	_____	_____	_____

FINAL APPROVAL:

DATE: \_\_\_\_\_ APPROVED BY: \_\_\_\_\_