GLOUCESTER CITY HOUSING AND BUILDING DEPARTMENT

700 SOMERSET STREET, GLOUCESTER, NJ 08030

(856) 456-7689 FAX: (856) 456-0289 EMAIL: housing@cityofgloucester.org LAND USE APPLICATION INFORMATION

Date:	Applicant Ph#:		Fax #:	
Name of Applicant:	E-Mail Address:			
Home Address:				
Zoned: (Zoning Office R-L – Residentia R-M – Residenti RC&S – Retail C CRO – Commerc HC – Highway C HIS - Historical LI – Light Indust PCH – Port Carg BI – Business In	al Low Density al Medium Density Commercial Service cial, Residential, Office Mixe Commercial trial to Handling dustrial aned Industrial Development eenway Recreation	d Use		
Property Address in que What applicant is seekin measurements.)	stion: Ag a permit to do: (Provide c	Block: opy of plot pla	Lot:	
Reason applicant needs	a Land Use application: (Zo o	ning Officer C	Only)	
B Variance (Interand/or Ordinance	eal of Zoning Officer) protection of Zoning Map e) Variance Site Plan) e Variance proval	Major S Major S Major S Major S Minor S Major S		
Zoning Official Signatur	re:			