



Request for Zoning Verification Letter

Department of Planning and Engineering

4 Harts Lane

East Brunswick, NJ 08816

(732) 390-6870

planningengineering@eastbrunswick.org

Date: _____

Please provide as much of the following information as you can in order for the Township to conduct a thorough review of your proposal. We will provide a written response including identification of necessary Township permits and approvals within ten (10) business days.

Address of Property: _____

Block: _____ Lot(s): _____ Zone: _____

Most recent known use of the property: _____

Name and type of proposed business: _____

Square footage of building to be used: _____

Anticipated parking requirements: _____

Proposed number of employees on maximum work shift: _____

Hours of operation: _____

Contact information:

Name: _____

Address: _____

Phone number: _____ Email Address: _____

Fee (\$50.00): _____

Receipt: _____