

TOWNSHIP OF WALL

**ZONING PERMIT APPLICATION:  
TEMPORARY OUTDOOR DINING AREA &  
TEMPORARY OUTDOOR RETAIL AREA**

**Please PRINT Clearly!!** (Illegible or incomplete documents will not be reviewed)

**Property Owner's Name:** \_\_\_\_\_ **Phone Number:** (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

**Address & Zip Code:** \_\_\_\_\_

**E-Mail:** \_\_\_\_\_

**Applicant's Name:** \_\_\_\_\_ **Phone Number:** (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

**Address & Zip Code:** \_\_\_\_\_

**Applicant is:** Owner \_\_\_\_ Contractor \_\_\_\_ Tenant \_\_\_\_ Other (describe) \_\_\_\_\_

**E-Mail:** \_\_\_\_\_

**Address of Property:** \_\_\_\_\_ **Block:** \_\_\_\_\_ **Lot:** \_\_\_\_\_

**Zone District:** \_\_\_\_\_ **Property Use:** \_\_\_\_\_

**PROPOSED OUTDOOR AREA TYPE:**

- 1.  **Temporary Outdoor Dining Area**
- 2.  **Temporary Outdoor Retail Area**

**REQUIRED SUPPLEMENTAL APPLICATION ATTACHMENTS** *(Must be submitted with all applications):*

- 1. Applicant AND Property Owner/Property Manager signature at bottom of this application.
- 2. Two (2) copies of an accurately scaled survey/plot plan showing the following:
  - a. All existing conditions and location of proposed outdoor dining/retail area with tables, access, traffic protection areas, and fencing shown DRAWN TO SCALE
  - b. Setback dimensions from property lines of proposed outdoor dining/retail area.
- 3. For outdoor dining only:
  - a. Number of tables during current operation \_\_\_\_\_.
  - b. A copy of this application with attachments must be emailed to [mjahn@twp.freehold.nj.us](mailto:mjahn@twp.freehold.nj.us) and [jpalatini@twp.freehold.nj.us](mailto:jpalatini@twp.freehold.nj.us) for review.
- 4. For outdoor alcohol: A COVID -19 Expansion Permit must be submitted through ABC's POSSE online Licensing System.

Applicant certifies that all statements and information provided herein are true to the best of his knowledge, information and belief. Applicant and Property Manager/Owner certifies compliance with all pertinent municipal, county, state, and federal regulations and requirements with respect to the subject property.

**Signature of Applicant:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Signature of Property Manager or Property Owner:** \_\_\_\_\_ **Date:** \_\_\_\_\_

*Once the application is reviewed, the Land Use Office contact the person listed as the applicant on the application via email if there are any problems or questions that arise. Once the application is approved, the Land Use Office will contact the person listed as the applicant on the application via telephone to pay for the application.*