

APPLICATION FOR FLOODPLAIN DEVELOPMENT

CITY OF VENTNOR CITY CONSTRUCTION CODE ENFORCEMENT

6201 ATLANTIC AVE, VENTNOR, NEW JERSEY 08406

Phone (609)823-7987 Fax (609) 823-7966

NOTE: STAMP DATE RECEIVED: For Substantial Improvement/Damage Purposes

LOCATION:		
OWNER:	PHONE #	EMAIL
OWNER ADDRESS:		
CONTRACTOR'S NAME:	PHONE #	EMAIL
CONTRACTORS ADDRESS:	LICENSE #	

Description of Work: (check all applicable boxes)

ROOF <input type="checkbox"/> WINDOWS <input type="checkbox"/> FIXTURES <input type="checkbox"/> CABINETS <input type="checkbox"/> TILE <input type="checkbox"/> FLOORING <input type="checkbox"/> SIDING <input type="checkbox"/>
TOTAL PROJECT COST TO INCLUDE MATERIAL & LABOR: \$
OTHER (DESCRIPTION)
<input type="checkbox"/> CONTRACTOR/OWNER SIGNATURE (print) _____ _____ (signature) _____ CHECK# _____ PAID \$ _____

OFFICE USE ONLY:

REQUIRED B.F.E.	ASSESSED VALUE OF STRUCTURE \$
FLOOD COMMENTS:	DENIED <input type="checkbox"/> DATE <input type="checkbox"/> SEE PLAN REVIEW NOTES

APPROVED: _____