Application for Variance Approval for West Central Neighborhood

NJ 6 1 4 11	A
Name of applicant #1	
Primary Address	
Phone number	
Secondary Address	
Phone number	
Name of applicant #2	
Primary Address	
Phone number	
Secondary Address	
Phone number	
Corporation Name (if applicable)	
Proposed business address:	
3. Current condition of property	
4. Proposed changes to property	

Please attach any other pertinent information to the back of the application form. This may include letters of support, petitions, or any other additional information.

Pg. 2 1.	Purpose of business requiring variance	
2.	Goal of business: Short t	term:
	Lor	ng term:
3. busines		al is an appropriate location for your
4.		vithin the West Central Neighborhood is viable and
5.	Explain any foreseeable effects on the Neighborhood (positive and negative): a. Immediate neighbors	
6.	b. Neighborhood at large	
7.	Any other pertinent infor	mation
"The a		hed exhibits, to my knowledge and belief, are true and correct."
(indivi	dual requesting variance)	(address of person signing)
(title) Explan	nation and/or restrictions for	(phone number of person singing)
	and or restriction for	
Suppor Signed	rt Oppose l:	
(West (date)_	Central President)	(Treasurer or other executive board member)