

Township of Warren Board of Health

Somerset County

46 Mountain Boulevard, Warren, New Jersey 07059-5695
908-753-8000 Extension 239 – (Fax) 908-757-9173

APPLICATION FOR VARIANCE FROM ORDINANCE 88-1A

Block _____ Lot(s) _____

Date: _____

APPLICANT:

NAME _____ ADDRESS _____

HOME PHONE _____ OTHER PHONE _____

OWNER:

NAME _____ ADDRESS _____

HOME PHONE _____ OTHER PHONE _____

REASON FOR VARIANCE REQUEST:

CHECK

REASON

SPECIFIC INFORMATION

_____	Residential dwelling 200 feet or more from sewer.	Engineer's certification of distance.
_____	Commercial or industrial building 300 feet or more from sewer.	Engineer's certification of distance.
_____	Physical condition requiring use of lift pump.	Engineer's certification of condition.
_____	Financial or other unusual hardship.	Submit financial records directly to the Board of Health Attorney as noted below.
_____	Other (describe) _____	Varies depending on request.
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

All applications will require, at a minimum, submission of the above specific information plus proof from an engineer that the current system is operating in a satisfactory manner, proof that the septic tank has been pumped during the past three (3) years, and filing of a \$150.00 Application Fee.

For financial hardship, information as listed above must be submitted to the Board of Health.

In addition, submit financial records directly to the Board of Health Attorney:

***Fredi L. Pearlmutter, Esq.
Cooper, Rose & English, LLP
480 Morris Avenue
Summit, New Jersey 07901-1527***

The undersigned certifies the information provided on this application and the attachments are true and correct to the best of my knowledge.

Signature of Owner

Date

Signature of Applicant (if different) Date