



TOWN OF KEARNY

ZONING BOARD OF ADJUSTMENT

Town Hall Annex - 410 Kearny Avenue

Kearny, New Jersey 07032

(201) 955-7881

FAX (201) 998-5171

AFFIDAVIT OF PROOF OF SERVICE

STATE OF NEW JERSEY)

SS:

COUNTY OF HUDSON)

Re: PREMISES _____

Case No. _____

PROOF OF SERVICE OF NOTICES REQUIRED BY STATUTE
MUST BE FILED AND VERIFIED WITH BOARD SECRETARY
AT LEAST 2 DAYS PRIOR TO MEETING OR CASE WILL NOT
BE HEARD.

_____, of full age, being duly sworn
according to law, deposes and says, that (s)he reside(s) at _____

_____, in the municipality of _____

County of _____; and State of _____, that (s)he is

(are) the applicant(s) in a proceeding before the Zoning Board of Adjustment of the Town of Kearny, being
an appeal or application under the Zoning Ordinance and relates to the premises _____;

that on _____, 19____, he gave written notices of the hearing on this application to each and all of the persons upon whom service
must be had, in the required form and according to the attached lists, and in the manner indicated thereon pursuant to R.S. 40:55D-12
and Town Ordinance 9.230 through 9.254. The said notice was served not less than ten days prior to the date of the hearing.

Applicant's Signature

SWORN AND SUBSCRIBED TO BEFORE ME
THIS DAY OF _____, _____

NOTARY PUBLIC

(Note to Applicant: Attach list of all persons served
and return receipts.)