BOROUGH OF
EAST RUTHERFORD, Bergen County

199 Paterson Avenue
East Rutherford, NJ 07073
Tel: (201) 933-5649
Fax (201) 933-6094

Commercial Application For Certificate for Occupancy

CONSTRUCTION OFFICE

Building Type: ☐Business
☐Multi Dwelling- Number of Units_____

FEES: Initial Fee: $120.00, Re-inspection Fee: $50.00 per Bldg,
Multi Dwellings Greater Than 3 Units: Additional $10.00 per unit

Property in which Application is made:

Street Address: _____ Block #: _____ Lot #: _____ Qual # _____
Tax Office Address: _____
Previous/Existing Tenant and Use: _____

Present Owner Information:

Name: _____ Telephone: _____
Address: _____

New Information: ☐Tenant ☐Buyer

Name: _____ Use Group: _____ Number of Employees: _____
Name Business will be operating under: _____
Present Mailing Address: _____
Telephone: _____ Cell: _____ Emergency Contact Number: _____
Tenant Area: _____ (sq. ft.) Total Area of Building: _____ (sq. ft.)
Detailed description of purposed use: _____

_____

Is retail planned? _____ Number of off street parking spaces for customers: _____
What outdoor storage or activities planned: _____

_____

Description and Cost of Proposed Construction (including signs): _____

_____ $_____

Number of off street parking spaces provided: _____ Number/ Type of trucks/trailers owned: _____ _____
Number of off street truck spaces provided: _____ Number/Type of truck delivery anticipated: _____

Note: All applications are subject to East Rutherford Site Plan Approval Ordinance #96-02 Article IV. The application must be filled out completely by printing all the information on the lines provided. If an application is unreadable or information is omitted the application will be deemed incomplete and not acted upon until such information is provided. The application to be complete must have the inspection fee of $120.00 paid at the time of submittal. Along with the application the owner should provide to the office a copy of the most recent survey for our files. All signs must be approved and permits issued by the Borough of East Rutherford. If property affects County road or drainage structure, County site plan approval may be necessary. If land disturbances grater than 5,000 sq. ft. expected, Soil Conservation district approval required.

Signature of Application:

_____ _____ _____
Printed Name Signature Date

Owner's Authorization: I hereby authorize _____ to act as my agent in pertain to this application.

_____ _____ _____
Owner's Printed Name Owner's Signature Date

The owner's authorization of this application is also consent to allow this office to inspect the subject property.*

Office Use Only
Date Received: _____ Amount: _____ Check#: _____ Receipt#: _____ By Whom? _____

BOROUGH OF
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CONSTRUCTION OFFICE

OFFICE USE ONLY

ZONING OFFICIAL

☐**Approved** for use as a _____

_____

☐Use permitted by Ordinance.

☐Use permitted by variance approved on subject to any special conditions attached to the grant thereof.

☐ Valid nonconforming use as established by ( ) finding of the zoning Board of Adjustment, or ( ) by the undersigned zoning officer on the basis of evidence supplied by applicant as specified on the reverse hereof. Also specified on the reverse hereof is a detailed statement of all aspects of the nonconforming use.

☐There is a nonconforming structure on the premises by reason of insufficient ☐ set-back, ☐ side yards, ☐rear yard, ☐other (specify) _____

_____ _____
Signature Date

CONSTRUCTION OFFICIAL

Site Plan Ordinance 96-02

☐Waver from site plan: Ordinance 96-02 Article IV Section 18.E.

☐Applicant must appear before East Rutherford Planning Board

☐Site Plan to be preformed by Zoning Board

_____ _____
Signature Date

HMDC

☐ Approved ☐Conditional Approved ☐ Denied ☐Date: _____

BUILDING DEPARTMENT

Open Permit: _____ Police Card given: _____

>5000 sq. ft. Knox Box: _____ Outstanding Violations: _____

Sprinkler System: _____ Property Maintenance Violations: _____

Fire Alarm: _____ Fire Prevention Violations: _____

INSPECTIONS

nspection Date: _____ ☐ Pass ☐ Fail Inspection Date: _____ ☐ Pass ☐ Fail

nspection Date: _____ ☐ Pass ☐ Fail Inspection Date: _____ ☐ Pass ☐ Fail

CERTIFICATE OF OCCUPANCY NUMBER ISSUED

CO# issued _____

Use Group	Construction Classification	Maximum Live Load	Occupancy Load	Zoning District

Description/ Conditions: _____