

TOWNSHIP OF MAHWAH  
475 CORPORATE DRIVE MAHWAH, NJ 07430

TENANT APPLICATION CHECKLIST

1. COMPLETE TITLE BLOCK INFORMATION.
2. SITE PLAN TO SCALE INDICATING AREA TO BE OCCUPIED BY TENANT (5 COPIES OF EACH).
3. FLOOR PLAN TO SCALE INDICATING AREA TO BE OCCUPIED BY TENANT (5 COPIES OF EACH).
4. DETAILED DRAWING OF PROPOSED SIGNS – IF EXISTING, INDICATE WHAT CHANGES IF ANY WILL BE MADE TO EXISTING SIGNS (5 COPIES OF EACH).
5. SIGN LOCATIONS AND DETAILS.
6. SHOW A DIAGRAM OF THE SANITARY FACILITIES (BATHROOMS) FOR EMPLOYEE USE.
7. SANITARY SEWER OR SEPTIC SYSTEM (CIRCLE ONE).
8. SIGNATURE OF OWNER.
9. SIGNATURE OF TENANT.
10. APPLICATION FEE OF \$140.00 – CHECKS TO BE MADE OUT TO THE TOWNSHIP OF MAWAH.
11. MUST SHOW A PARKING PLAN FOR THE COMPLETE LOCATION AND ALSO SHOW NUMBER OF PARKING SPACES EACH TENANT IS USING INCLUDING YOURS.
12. IF IT IS DETERMINED BY THE ZONING OFFICER THAT THIS APPLICATION NEEDS PLANNING BOARD APPROVAL, AN ADDITIONAL FEE OF \$100.00 IS REQUIRED BY THE PLANNING BOARD TO COVER ADMINISTRATIVE FEES.
13. MUST SHOW WATER LINE (OR WELL), SEWER LINE (OR SEPTIC SYSTEM) AND DUMPSTER ENCLOSURE TO SATISFY HEALTH DEPARTMENT REQUIREMENTS. FAILURE TO PROVIDE THIS INFORMATION WILL RESULT IN A DENIAL OF THE APPLICATION BY THE HEALTH DEPARTMENT.

ALL INFORMATION MUST BE COMPLETE AND COPIES ATTACHED.

TOWNSHIP OF MAHWAH  
TENANT APPLICATION

TENANT NO. \_\_\_\_\_

DATE \_\_\_\_\_

FEE \$140.00

PAID:

CASH \_\_\_\_\_

CHECK # \_\_\_\_\_

ADDRESS \_\_\_\_\_

BLOCK \_\_\_\_\_ LOT \_\_\_\_\_ ZONE \_\_\_\_\_

TENANT NAME \_\_\_\_\_

NAME OF APPLICANT \_\_\_\_\_

ADDRESS OF APPLICANT \_\_\_\_\_

TELEPHONE # (\_\_\_\_) \_\_\_\_\_

E-MAIL \_\_\_\_\_

TYPE OF BUSINESS \_\_\_\_\_

NAME OF PROPERTY OWNER \_\_\_\_\_

ADDRESS OF PROPERTY OWNER \_\_\_\_\_

TELEPHONE # (\_\_\_\_) \_\_\_\_\_

E-MAIL \_\_\_\_\_

IS THIS A SUBLEASE? \_\_\_\_\_. IF YES, FROM WHOM: \_\_\_\_\_

SPACE TO BE OCCUPIED BY TENANT \_\_\_\_\_ SQ. FT.

ATTACH PLAN TO SCALE OF INTERIOR OF BUILDING INDICATING SPECIFIC AREA TO BE OCCUPIED. PLANS MUST HAVE SUFFICIENT INFORMATION AND CLARITY FOR REVIEW OF CODE REQUIREMENTS. INCLUDE DETAILS OF TENANT SEPARATIONS OF WALL, MEANS OF EGRESS, FIRE SAFETY AND LIGHT AND VENTILATION.

USE GROUP \_\_\_\_\_ FIRE GRADING \_\_\_\_\_ CONSTRUCTION CLASSIFICATION \_\_\_\_\_

PRODUCT AND/OR MATERIAL STORAGE. (STATE IF MATERIAL IS FLAMMABLE OR TOXIC, SUBMIT MANUFACTURERS SPECIFICATION SHEET FOR EACH CHEMICAL IF APPLICABLE). \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

STORAGE: INDOOR \_\_\_\_\_ OUTDOOR \_\_\_\_\_

DESCRIBE IN DETAIL ALL SAFETY PROVISIONS FOR STORAGE \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

NUMBER OF EMPLOYEES \_\_\_\_\_

NUMBER OF SHIFTS \_\_\_\_\_

HOURS OF OPERATION \_\_\_\_\_

DAYS OF OPERATION \_\_\_\_\_

NUMBER OF PARKING SPACES FOR APPLICANT \_\_\_\_\_. (PROVIDE TENANT  
PARKING SPACE LOCATION ON SITE PLAN/SURVEY).

TOTAL NUMBER OF PARKING SPACES ON SITE \_\_\_\_\_

LIST OTHER TENANTS AND PORTION, IN SQUARE FEET, OF BUILDING THEY OCCUPY.

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WILL THE TENANT BE PROVIDING ANY OF THE FOLLOWING:

VENDING MACHINES      YES      NO

WHAT TYPE \_\_\_\_\_ HOW MANY \_\_\_\_\_

ONSITE FOOD PREPARATION / SERVICE      YES      NO

PREPACKAGED SNACKS / DRINKS      YES      NO

### SIGNS

IF ANY SIGNS ARE PROPOSED, SUBMIT A RENDERING OF ALL SIGNS AND PROVIDE  
PROPOSED LOCATION ON SITE PLAN/SURVEY.

ILLUMINATED      \_\_\_ YES      \_\_\_ NO

\_\_\_\_\_  
PRINT NAME OF OWNER

\_\_\_\_\_  
DATE

\_\_\_\_\_  
SIGNATURE OF OWNER

\_\_\_\_\_  
PRINT NAME OF TENANT

\_\_\_\_\_  
DATE

\_\_\_\_\_  
SIGNATURE OF TENANT

NOTE: ALL SIGNS REQUIRE A ZONING APPLICATION AND BUILDING PERMIT. AN  
ELECTRICAL PERMIT IS REQUIRED FOR ILLUMINATED SIGNS.