



BOROUGH OF ROSELLE

210 CHESTNUT STREET • ROSELLE, NEW JERSEY 07203
TELEPHONE (908) 245-5600

- APPLICATION FOR CERTIFICATE OF USE**
- APPLICATION FOR TEMPORARY C. OF O.**

Date _____ Block _____ Lot _____

Address of Property _____

Do You Have Any Open Permits? Yes No

Give a brief description of property by supplying the following info:

- 1 Family
- 2 Family
- 3 Family
- 4 or more _____

Number of Apartments	Number of Kitchens	Number of Bathrooms	Number of Bedrooms	Number of Floors

FOR OFFICE USE ONLY

Application # _____

Fee: \$

- Cash _____
- Check/No. _____

Received By _____

Ent: _____ by _____

Inspection Date: _____

The following information **MUST** be printed and completed in full

Name of Owner _____ Telephone # () _____

Address _____ City _____ State _____ Zip Code _____

Name of Buyer/Tenant _____ Telephone # () _____

Present Address _____ City _____ State _____ Zip Code _____

Floor _____

Type of Building Use: Residential Business Industrial Commercial

TO BE COMPLETED FOR ANY BUSINESS OR TENANT:

Have you obtained Zoning Approval for your business or tenant occupancy? Yes No

State the nature of your operation or service _____

What will you manufacture or sell? _____ Hours of Operation _____

Square footage you will occupy _____ Is parking available _____ If so, how many spaces _____

How many persons will be employed? _____ What floor will tenant occupy? _____

Will you use or store any combustibles or flammable materials on the premise? _____

If so, explain fully _____

****NOTE: This is not a home inspection. It is an inspection for a Certificate of Occupancy ONLY****

STATEMENT

I, _____ being duly sworn on my oath deposes and says that I am the maker of this application. That I reside at _____ (Street) _____, in the city of _____, state of _____, zip code _____. Phone number () _____, and that the above is the owner(s) of the building or structure and that the statements are correct and true in all particulars. I further realize and understand if my operation changes, or I move to a new location, a new Certificate of Use must be obtained. I understand that I must supply the name of the buyer, before a Certificate of Use is issued.

SIGNATURE OF APPLICANT

DATE

Would you like to pick up the certificate or have it mailed?

- Pick Up
- Mail

Mail To: _____

FOR ZONING USE ONLY

Zone _____

Use _____

- Residential Business
- Commercial Industrial
- Residential/Business

APPROVED

DENIED _____
Zoning Officer