



# BOROUGH OF ROSELLE

210 CHESTNUT STREET • ROSELLE, NEW JERSEY 07203  
TELEPHONE (908) 634-4530

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

Date \_\_\_\_\_ Block \_\_\_\_\_ Lot \_\_\_\_\_

Address of Property \_\_\_\_\_

- Please answer all questions.
- Where there is a Buyer/Tenant, circle one.
- All addresses submitted must be current residences.

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 # \_\_\_\_\_

Open Permits?  
Yes  No

Fee: \$ \_\_\_\_\_

Cash \_\_\_\_\_ Received By \_\_\_\_\_

Check/No. \_\_\_\_\_

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 OFFICE USE ONLY**

Zone \_\_\_\_\_

Use \_\_\_\_\_

Residential     Business

Commercial     Industrial

Residential/Business

APPROVED

DENIED \_\_\_\_\_