BOROUGH OF PARK RIDGF

55 Park Avenue Park Ridge, NJ 07656

ZONING OFFICER (201) 573-1800 x506 FAX: (201) 391-7130

Website: www.parkridgeboro.com

APPLICATION FOR A CERTIFICATE OF CONTINUED OCCUPANCY

Resale of Commercial Property

BLOCK:	_LOT:	ZONE:	DATE:			
Present Owner of Property:						
Telephone Number: Business_			Cell			
			Cell			
Email:						
Proposed Closing Date:						
Application is hereby made for a Certificate of Continued Occupancy for the subject property						
indicated above:						
Signature of New Owner:			Date:			

FOR OFFICE USE ONLY						
CCO FEE: \$200 for less than 10,000 sq. ft/\$250 for over 10,000 sq. ft						
Check/Cash	R	eceived by:	Date:			
Date CCO Issued:						
Signed:	Date:	Signed:	Date:			
Zoning Officer Fire Prevention Officer			evention Officer			
TA A CHONG CONTRACTOR	73.10 FF 50 0 FF 1					

****PLEASE NOTE: A KNOX BOX KEY MUST BE PROVIDED TO FIRE PREVENTION INSPECTOR.

Purpose of which application is made:

BI	lockLot_	Zone				
1.	Location of property:					
2.	Property owner's name:					
3.						
4.	Telephone number (business)	(resid	ence)			
5.	Previous tenant/use:					
Proposed tenant/use:						
1.	Name of tenant/company name:					
2.	Present mailing address:					
3.	Telephone number:					
4.	Detailed description of Proposed Use:					
a.	Type of business:					
b.	Hours of operation:					
c.	Days of operation:					
d.	Number of employees:					
e.	e. Number of off-street parking spaces provided:					
f.	Number of trucks/trailers owned:					
g.	Description of trucks/trailers:					
h.	Description of manufacturing equipment/p	rocess:				
i.	Chemical/hazardous materials anticipated:					
j.	Air/water discharge anticipated:					
k.	Outdoor storage activities planned:					
1.	Square footage of area: Office	Retail				
Take-out food service# of seats#						
Other						