

TOWNSHIP OF NUTLEY



APPLICATION FOR ZONING CERTIFICATE FOR THE RESALE OF A 1, 2 or 3 FAMILY DWELLING

Proper	ty Address				
					g Date:
Name a	and Address of Se	eller			
					Phone
					Phone
					Phone
Numbe	er of Dwelling Unit	S			
Will the	ere be any propose	d constru	action work? If so, ple	ase describe in detail	
true and	d accurate. I (We)	understa	* *	t transfer ownership o	the information contained herein is of the property until inspections are
Date			Signature		
	NOTE:	There w	ill be a re-inspection	fee of \$20.00 per d	welling unit.
	For office use or	nly:			
	Fee Remitted:	\$		Certificate #:	
	Check #/cash.: Collected by: Date Received:			Lot Size:	

CHECKLIST FOR ZONING PERMIT FOR INTERNAL USE ONLY

Address:		
Owner:		
Date of Finals	OPEN PERMITS	Initial ONLY if final
	Building Subcode Official	
	Electric Subcode Official	
	Plumbing Subcode Official	
	Fire Subcode Official	
	Elevator Subcode Official	
Date Researched	PRIOR HISTORY	Comments
Date Researched		Comments
	UCC Permits	
	Zoning Permits	
	Check Permit Draw	
	Planning & Zoning Cards	
	Resolutions	
	UCC Violations	
	Zoning Violations	
	Property Maintenance	
	Lawn Liens	

EMPLOYEE SIGNATURE: