



TOWNSHIP OF NUTLEY



APPLICATION FOR ZONING CERTIFICATE FOR THE RESALE OF A COMMERCIAL BUILDING OR MULTI-FAMILY STRUCTURE

Property Address _____

Block _____ Lot _____ Zoning District _____ Closing Date: _____

Name and Address of Seller _____

_____ Phone _____

Email Address _____

Name and Address of Buyer _____

_____ Phone _____

Email Address _____

Number of Businesses in the Building _____

Names of Businesses (if additional space is needed, please attach separately) _____

Number of Apartments in Building _____

Will there be any proposed construction work? If so, please describe in detail _____

Is there a fire alarm present? If so, please provide updated certification _____

I (We) hereby certify that I (we have read this application thoroughly and that the information contained herein is true and accurate. I (We) understand that I (we) may not transfer ownership of the property until inspections are made and a Zoning Certificate is issued for such use or occupancy.

Date _____ Signature _____

<u>For office use only:</u>	
Fee Remitted: \$ _____	Certificate #: _____
Check #/cash.: _____	Use Group: _____
Collected by: _____	_____
Date Received: _____	_____

**CHECKLIST FOR ZONING PERMIT
FOR INTERNAL USE ONLY**

Address: _____

Owner: _____

OPEN PERMITS

Date of Finals		Initial ONLY if final
_____	Building Subcode Official	_____
_____	Electric Subcode Official	_____
_____	Plumbing Subcode Official	_____
_____	Fire Subcode Official	_____
_____	Elevator Subcode Official	_____

PRIOR HISTORY

Date Researched		Comments
_____	UCC Permits	_____
_____	Zoning Permits	_____
_____	Planning & Zoning Cards	_____
_____	Resolutions	_____
_____	UCC Violations	_____
_____	Zoning Violations	_____
_____	Property Maintenance	_____
_____	Lawn Liens	_____

EMPLOYEE SIGNATURE: _____