

CONSTRUCTION CODE
ENFORCEMENT DEPARTMENT
KEARNY, N. J.



APPLICATION FOR CERTIFICATE

PERMIT NO. _____
DATE ISSUED _____
Block _____ Lot _____
Subdivision _____
Notice No. _____

IDENTIFICATION

OWNER:	CONSTRUCTION LOCATION:
Name _____	Address _____
Address _____	Tel. (____) _____
Town/State/Zip _____	

ACTION

- | | |
|---|---|
| <input type="checkbox"/> CERTIFICATE OF OCCUPANCY | <input type="checkbox"/> CERTIFICATE OF APPROVAL |
| <input type="checkbox"/> CERTIFICATE OF CONTINUED OCCUPANCY | <input type="checkbox"/> TEMPORARY CERTIFICATE OF OCCUPANCY |
- USE GROUP: _____ Previous _____ Current

FINAL COST OF CONSTRUCTION: \$ _____
(Include value of any new structure, all on-site improvements, built in furnishings and fixtures and all integral equipment exclusive of process or manufacturing equipment.)

A set of "As-Built" or amended drawings is required if the building or structure deviates from the approved plans filed with the construction permit. Use space below to describe any deviations from approved plans:

If you are requesting a Temporary Certificate of Occupancy, please explain why in the space below.

I hereby attest, that to the best of my knowledge, all work has been completed in accordance with the approved plans, permit and Regulations. Incomplete items listed on a Temporary Certificate of Occupancy will be completed by the date on the Certificate.

SIGNED: _____ OWNER/AGENT

Owner
 Agent

SUBCODE OFFICIAL APPROVAL

BUILDING SUBCODE OFFICIAL	_____	DATE _____
FIRE PROTECTION SUBCODE OFFICIAL	_____	DATE _____
PLUMBING SUBCODE OFFICIAL	_____	DATE _____
ELECTRICAL SUBCODE OFFICIAL	_____	DATE _____

New Construction Change of use Continued use Temporary use

1. APPLICANT INFORMATION:

- (a) Name of Applicant _____
- (b) Present Mailing Address _____
- (c) Telephone Number (Business) _____ (Residence) _____

2. PROPERTY FOR WHICH APPLICATION IS MADE:

- (a) Location of Property: Street _____
Block _____ Lot _____ Zone _____
- (b) Property Owner's Name _____
- (c) Present Mailing Address _____
- (d) Telephone Number (Business) _____ (Residence) _____
- (e) (Previous) (Existing) Tenant and Use _____

3. PROPOSED TENANT/USE

- (a) Name of Tenant/Occupant _____
- (b) Present Mailing Address _____
- (c) Detailed Description of Proposed Use _____

- (d) Description of Manufacturing Equipment/Processes _____

- (e) What air/water discharge anticipated _____

- (f) Description and Cost of Proposed Construction _____

- (g) Hours of operation _____
- (h) Number of (employees) (residents) New _____ Total _____
- (i) Number of offstreet parking spaces provided _____
- (j) Number, location and size of loading area anticipated _____
- (k) Number and type of trucks/trailers owned _____

- (l) Number of offstreet truck spaces provided _____
- (m) What outdoor storage activities planned _____

- (n) Is retail outlet store planned? _____
- (o) Number of offstreet customer spaces provided _____

4. SIGNATURE OF APPLICANT (must be the same as in 1 above).

(Signature) _____
(PRINT NAME) _____ Date _____

5. OWNER'S AUTHORIZATION: I hereby authorize _____
as the applicant listed above, to act as my agent in matters pertaining to this application.

(Owner's Signature) (Printed Name) (Date)

CCED OFFICE USE ONLY

DATE RECEIVED _____ FEES RECEIVED _____
 APPROVED C/O # _____ Date _____
 DENIED