

<b>Site Address</b>		<b>Block</b>	<b>Lot</b>	<b>Zone</b>
<b>Type of Application</b>	<input type="checkbox"/> Change in Tenant	<input type="checkbox"/> Change in Ownership		
<b>Property Owners Information:</b>				
<b>Name</b>				
<b>Address</b>				
<b>Phone #</b>				
<b>Fax #</b>				
<b>Previous Business Name</b>				
<b>Previous Business Use</b>				
<b>Property Owners Permission</b>				
By signing this application I am giving you permission to visit my property to view and verify all existing conditions if it is needed.				
<b>Signature of Property Owner:</b> _____ <b>Date:</b> _____				

***Include 3 copies of the following items***

<input type="checkbox"/> Photo	<input type="checkbox"/> Interior Bldg plan, neat to scale	<input type="checkbox"/> Sealed/Engineered Site Plan w/ parking layout (under 5 yrs)
<input type="checkbox"/> Check made payable to "Twp of River Vale" in the amount of \$ 30.00		
Date	Check #	Batch #

***I certify that the statements made herein are true:*** \_\_\_\_\_  
 Landlord / Tenant (Circle one)

Any incorrect or falsified information will render this application void and any approvals based on it.

<b>Proposed New Tenant / Owner and Use Information</b>	
Registered / Legal / Corp. Name	
Business ( <b>d b a</b> ) Name	
Sq Footage being Leased / Sold	
Business Owners Name	
Business Owners Home Address	
Business Owners Tele. # & Fax	
Hours of Operation to be	
Days of Operation will be	
Number of Employees will be	
# of Designated Parking Spaces	
<b>Business Use -- -----→</b>	<b>Attach a detailed, typed description of your proposed use</b>
<b>Building Improvements -----→</b>	<b>Description of proposed renovation, other than general painting etc</b>
<b>Signage to be installed -----→</b>	<b>Separate application must be filed</b>
<b>Outside Storage -----→</b>	<b>Not Allowed in any Zone</b>
* * * * For Zoning Official's Use Only * * * * *	
Any missing information will render this application <b>denied</b> and another fee may be assessed	

# Business Zoning Review

Before a Zoning Certificate is issued, all required pre-approvals by other Borough agencies i.e. fire, health, police, etc., must be obtained.

Three (3) copies of the following must be submitted to the Zoning Official	
1.	<b>Completed Application</b>
2.	<b>Photos</b> front, sides, & rear
3.	<b>Building Plans/Layout</b> showing all tenant spaces & uses etc..

All signage requires a separate zoning permit application to be filed and may require a construction permit. Please follow the sign regulations as per the River Vale Zoning Ordinances for the zone which you are in.

The **Office Copy** of this application **MUST BE SIGNED** by the Health Department, before the Building Department can accept your application.

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Date

## **Health Department Inspections ARE REQUIRED before Opening**

Food Related Services  
Pet Shops  
Nursery Schools  
Nursing Home Facilities

PLEASE COMPLETE APPLICATION ON REVERSE SIDE

