

NEW BUSINESS APPLICATION

The Borough of Highland Park – Zoning Dept.

221 South 5th Avenue, Highland Park, NJ 08904

Phone: (732) 819-3795

Fax: (732) 777-6017

FOR OFFICE USE

ONLY

Paid: Check # _____

Cash _____

Date _____:

Sign & return the completed application to the Zoning Office a fee of \$125.00
Please make checks payable to the Borough of Highland Park

1. Subject Property

Address: _____ Block: _____ Lot: _____ Zone: _____

CONTACT INFORMATION

2. Applicant

Name: _____ Address: _____ Phone: _____

Email _____

3. Owner

Name: _____ Address: _____ Phone: _____

4. Most Recent Use of Property

5. Name and type of business proposed: _____

Square Footage of building to be used: _____

Proposed number of employees on maximum work shift: _____

Hours of Operation: _____

Anticipate Parking Requirments: _____

6. To the best of your knowledge, have **Development Restrictions/prior board approvals** been placed on the property?

Yes No If yes, please describe/date of prior approvals:

CERTIFICATION: I (We) hereby certify that the statements contained herein are true & accurate.

Signature of Applicant

date

Signature of Owner

date

Based on information submitted & requirements of the Borough's Land Use Ordinance, this application is:

Approved: [] Permits Required [] Fire Inspection Required [] Health Dept. Review
[] Health Dept. Inspection [] Business License

Denied _____ **COMMENTS:**

Signature of Zoning Officer _____ date _____