Borough of Hillsdale

380 Hillsdale Avenue • Hillsdale, New Jersey 07642-2794
201-722-2612 • Fax: 201-664-0337• www.hillsdalenj.org

Zoning Office

Borough of Hillsdale
380 Hillsdale Avenue
Hillsdale, NJ 07642
201-722-2612
Fax: 201-664-0337

Requirements for a change of ownership or tenancy of a commercial building or business.

1. A New Business application shall be submitted by the new owner or tenant for all non-residential buildings in the Borough of Hillsdale. The fee for a zoning review is Eighty dollars. ($80.00)

2. The application shall state whether the use is to remain the same or if a change from the current use to a different use is proposed.

3. If changes are proposed to be made to the site or to the current use, a description of the new use and any proposed work must be submitted to the zoning department. A current property survey or approved site plan must also be submitted.

4. If changes are being proposed to the interior of the structure an application for construction permits, along with architectural drawings must be submitted to the Building Department for their review and approval.

5. If no changes are proposed, and after a review by the Zoning Officer and Fire Official, a fire prevention inspection will take place. Every change of tenant in any commercial space, must provide the following: Architectural floor plans and reflective ceiling plan – indicating existing or new exit signs and lights as well as Occupancy Load, Use group, Construction Class/ Key map of the building with tenants must be provided.

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NEW BUSINESS APPLICATION

Date: _____ Control No. _____

Property Address_____ Block ____ Lot ____ Zone_____

Property Owner Name _____ Address_____

New Business Name_____ E-Mail _____

Prior Business Name _____

Tenant Name_____

Tenant Home Address_____

Business Phone No. _____ Emergency contact Phone No. _____

Type of Business_____

Building Improvements proposed? Yes _____No____ Explain_____

Interior Square Footage _____

Applicant Signature_____ Date_____

Check payable to: the Borough of Hillsdale, NJ for **$ 80.00**

Anthony Merlino - Zoning Official _____ Date_____

CHECK AMOUNT_____ CHECK NO. _____ DATE PAID _____

9/22/16

Hillsdale Fire Prevention Bureau

380 Hillsdale Ave.
Hillsdale, New Jersey 07642
Voice Mail: 201-722-2612 ex-1564
Fax: 201-664-0337

Annual or New Business Registration
(please print or type all information)

The Uniform Fire Code states:

The owner of all businesses, occupancies, buildings, structures, or premises required to be inspected under Section 52:27D-203 shall apply annually to the Local Enforcing Agency for a Certificate of Registration upon forms provided by the Fire Official.
It shall be a VIOLATION of this Code for any owner to fail to return such forms to the Local Enforcing Agency and/or Fire Official within Sixty (60) days of receipt. 52:27D-203

****
this area office use only

Local I.D.#:_____ State I.D.#:_____ Date Registered:_____

****

Business Name:_____

Street Address:_____

_____

Phone #:_____ Fax #: _____

Do you... **OWN or LEASE** the property (circle one) **Your sq. ft. total:**_____

Building Owner's Name:_____

Federal I.D. Number:_____ Phone #:_____

Street Address:_____

_____

Business Owner's Name:_____

Federal I.D. Number:_____ Phone #:_____

Street Address:_____

_____

Business Type: Individual_____ Partnership_____ Corporation_____ Other_____

Goverment_____ Cooperative_____ Condominium_____ LLC_____

Manager/Agent:

Name:_____

Address:_____

City, State Zip:_____

Phone:_____

Please indicate with an arrow where all mail, actions, orders, or notices are to be sent.

APPLICATION FOR REGISTRATION OF BUSINESS

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this area office use only

Local ID#:_____ State ID#:_____ Date Registered:_____

****

Emergency Contacts:

#1:_____ Phone #:_____

#2:_____ Phone #:_____

#3:_____ Phone #:_____

Alarm/Suppression System Information:

( ) Smoke Detectors Only ( ) Sprinkler System Only ( ) Both ( ) None

Monitoring Co. Name:_____( ) NOT Monitored

Phone #:_____

Required Key Box location: ( )By Front Door ( )Left Side of Bldg.

( )Right Side of Bldg ( )Rear of Bldg. ( )No Box Present

Description of use/occupancy of this building/business:

_____

_____

I HEREBY ACKNOWLEDGE THAT I HAVE READ THIS APPLICATION, THAT THE INFORMATION GIVEN IS CORRECT, THAT I AM THE OWNER OR DULY AUTHORIZED TO ACT IN THE OWNER'S BEHALF, AND AS SUCH HEREBY AGREE TO COMPLY WITH THE APPLICABLE REQUIREMENTS OF THE UNIFORM FIRE SAFETY CODE AS WELL AS ANY SPECIFIC CONDITIONS IMPOSED BY THE FIRE OFFICIAL.

_____ _____

Print Name **Signature**

_____ _____

Title **Date**