



Borough of Netcong

23 MAPLE AVENUE
NETCONG, NEW JERSEY 07857

TEL 973-347-0252

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APPLICATION FOR A ZONING CERTIFICATE OF OCCUPANCY-\$40.00

The following must be completed for a change in ownership or change in tenant for any commercial business property.

| | | | |
|----------------------------------|--------|------|-------|
| Date: | Block: | Lot: | Zone: |
| Property Location/Street Address | | | |

| Property Owner's Information | Applicant's Information |
|---|-------------------------|
| Name: | Name: |
| Address: | Address: |
| City/State/Zip: | City/State/Zip: |
| Day Phone #: | Day Phone #: |
| Emergency Phone #: | Emergency Phone #: |
| Email: | Email: |
| Business Name: | |
| Previous Use: | |
| Proposed Use: | |
| Has the above reference property been subjected to any prior application to the Planning Board to the applicant's knowledge (if so attach resolution): | |
| Describe any proposed physical renovations to the interior or exterior to the above referenced property. | |
| Describe any proposed food handling or services. | |
| Describe any proposed changes in signage. | |
| <i>Provide a sketch of the proposed floor plan and property survey. If it is determined that a building and/or food handlers permits are required you will receive preliminary zoning approval.</i> | |
| I certify that the answers to the above questions and any statements made on same are true and complete to the best of my knowledge. | |
| Date: | Signature |

-----For Office Use-----

| | | | |
|-------------|--------------------------|---------------|-----|
| Approved: | Comments | | |
| Date | Zoning Officer Signature | | |
| Referral: | | | |
| Const. Code | Health Dept | Fire Official | SID |

Sign up for emergency notifications – text 07857 to 888777 or sign up at
<https://local.nixle.com/city/nj/netcong/>