

TOWNSHIP OF MAHWAH

TENANT APPLICATION CHECKLIST

1. COMPLETE TITLE BLOCK INFORMATION
2. SITE PLAN TO SCALE INDICATING AREA TO BE OCCUPIED BY TENANT. (9 COPIES OF EACH)
3. FLOOR PLAN TO SCALE INDICATING AREA TO BE OCCUPIED BY TENANT. (9 COPIES OF EACH)
4. DETAILED DRAWING OF PROPOSED SIGNS – IF EXISTING, INDICATE WHAT CHANGES IF ANY WILL BE MADE TO EXISTING SIGNS. (9 COPIES OF EACH)
5. SIGN LOCATION AND DETAILS.
6. SHOW A DIAGRAM OF THE SANITARY FACILITIES (BATHROOMS).
7. SIGNATURE OF OWNER.
8. SIGNATURE OF TENANT.
9. APPLICATION FEE OF \$50.00 – CHECKS TO BE MADE OUT TO THE TOWNSHIP OF MAHWAH.
10. MUST SHOW A PARKING PLAN FOR THE COMPLETE LOCATION AND ALSO SHOW NUMBER OF PARKING SPACES EACH TENANT IS USING INCLUDING YOURS.
11. IF IT IS DETERMIND BY THE ZONING OFFICER THAT THIS APPLICATION NEEDS PLANNING BOARD APPROVAL, AN ADDITIONAL FEE OF \$75.00 IS REQUIRED BY THE PLANNING BOARD TO COVER ADMINISTRATIVE FEES.

ALL INFORMATION MUST BE COMPLETE AND COPIES ATTACHED

DATE: _____

FEE: _____
(ORD, #913 - \$50.00)

NAME OF APPLICANT _____

ADDRESS OF APPLICANT _____

TELEPHONE # (____) _____

NAME OF PROPERTY OWNER _____

ADDRESS OF PROPERTY OWNER _____

TELEPHONE # (____) _____

ADDRESS OF BUSINESS _____

BLOCK _____ LOT _____

LOCATED IN WHAT ZONE _____

IS THIS A SUBLEASE? _____ IF YES, FROM WHOM: _____

LOCATION OF SPACE IN BUILDING (SQ. FT.) _____ SQ.FT.

ATTACH PLAN TO SCALE OF INTERIOR OF BUILDING INDICATING SPECIFIC AREA TO BE OCCUPIED. PLANS MUST HAVE SUFFICIENT INFORMATION AND CLARITY FOR REVIEW OF CODE REQUIREMENTS INCLUDE DETAILS OF TENANT SEPARATIONS OF WALL, MEANS OF EGRESS, FIRE SAFETY AND LIGHT AND VENTILATION.

TYPE OF BUSINESS _____

(DESCRIBE IN DETAIL, REFER TO USE GROUP CLASSIFICATION AND FIRE GRADING OF STATE UNIFORM CONSTRUCTION CODE).

USE GROUP _____ FIRE GRADING _____
CONSTRUCTION CLASSIFICATION _____

PRODUCT AND/OR MATERIAL STORAGE _____

(STATE IF MATERIAL IS FLAMMABLE OR TOXIC, SUBMIT MANUFACTURERS SPECIFICATION SHEET FOR EACH CHEMICAL IF APPLICABLE). PRODUCT AND/OR MATERIAL STORAGE _____

(STATE IF MATERIAL IS FLAMMABLE OR TOXIC, SUBMIT MANUFACTURERS SPECIFICATION SHEET FOR EACH CHEMICAL IF APPLICABLE).

STORAGE: INDOOR _____ OUTDOOR _____

DESCRIBE IN DETAIL ALL SAFETY PROVISIONS FOR STORAGE _____

NUMBER OF EMPLOYEES _____ NUMBER OF SHIFTS _____

HOURS OF OPERATIONS _____ DAYS OF OPERATION _____

NUMBER OF PARKING SPACES FOR APPLICANT _____

TOTAL NUMBER OF PARKING SPACES ON SITE _____

ATTACH A PARKING PLAN TO SCALE. IF A SITE PLAN HAS BEEN FILED WITH THE BUILDING INSPECTOR - ONE COPY OF THE APPROVED SITE PLAN MUST ACCOMPANY THIS APPLICATION.

LIST OTHER TENANTS AND PORTION, IN SQUARE FOOT, OF BUILDING THEY OCCUPY _____

SIGNS

IF ANY SIGNS ARE PROPOSED, SUBMIT A SKETCH AND SPECIFICATION OF SIGN. WHERE WILL SIGN BE LOCATED? _____

ILLUMINATED? YES _____ NO _____ ARE ANY SIGNS TO BE

REMOVED? YES _____ NO _____ IF YES, HOW MANY _____ ERECTED OR ALTERED _____

SIGNATURE OF OWNER

DATE

SIGNATURE OF TENANT

DATE

PRINT FULL NAME OF TENANT PRINCIPAL OFFICER

NOTE: ALL SIGNS REQUIRE A ZONING APPLICATION AND BUILDING PERMIT.