



Township of Mahwah

Municipal Offices: 475 Corporate Drive
P.O. Box 733 Mahwah, NJ 07430
Tel 201-529-5757 Fax 201-512-0537

Board of Adjustment ex 243
Board ex 245

Zoning/Planning

FEE: \$25.00

APPLICATION # _____

**HOME OCCUPATION
APPLICATION FOR ZONING PERMIT
TOWNSHIP OF MAHWAH
475 CORPORATE DRIVE
MAHWAH, N. J. 07430**

PERMIT NO. _____

APPLICANT NAME _____ **PHONE #** _____

APPLICANT'S ADDRESS _____

BLOCK _____ **LOT** _____ **ZONE** _____

IS THIS A COUNTY OR STATE ROAD? YES _____ **NO** _____
(CIRCLE ONE)

NAME & ADDRESS OF OWNER (IF DIFFERENT) _____

DIMENSION OF PRINCIPLE STRUCTURE _____

TOTAL SQUARE FOOT FLOOR AREA _____

SQUARE FOOT BEING USED FOR HOME OCCUPATION _____
(INCLUDE ANY STORAGE AREA)

**DESCRIBE IN DETAIL THE ACTIVITY TO BE CONDUCTED, EQUIPMENT TO BE USED,
NUMBER OF STUDENTS, ETC.** _____

PROVIDE PLAN SHOWING PARKING _____ **NUMBER OF SPACES** _____

NAME(S) OF RESIDENTS ENGAGED IN HOME OCCUPATION: _____

NAME(S) OF NON-RESIDENTS ENGAGED IN HOME OCCUPATION: _____

**HAS AN APPLICATION EVER BEEN MADE TO THE BOARD OF ADJUSTMENT? IF SO,
STATE WHEN AND WHAT FOR:** _____

**I SWEAR THE ABOVE APPLICATION IS TRUE AND CORRECT TO THE BEST OF MY
KNOWLEDGE AND I COMPLY WITH THE REQUIREMENTS OF ORD. #1225.**

DATE: _____ **(APPLICANT)**

(NAME OF COMPANY, IF APPLICABLE)

**ATTACH A SKETCH OF THE TOTAL FLOOR AREA AND SHOW AREA TO BE USED FOR
HOME OCCUPATION.**

DATE PERMIT ISSUED: _____ **APPROVED** _____ **DENIED** _____

ZONING OFFICER: _____ **FEE PAID** _____