

**BUSINESS USE PERMIT/CCO APPLICATION
BOROUGH OF OLD TAPPAN
227 OLD TAPPAN ROAD
OLD TAPPAN, NJ 07675
201/664-1849**

NAME OF BUSINESS _____

NAME OF BUSINESS OWNER _____

ADDRESS OF BUSINESS _____

BLOCK **LOT** **TELEPHONE** _____

DESCRIPTION OF BUSINESS _____

VENDING MACHINES **NUMBER OF EMPLOYEES** _____

SQUARE FOOTAGE **HOURS/DAYS OPEN** _____

**PARKING REQUIREMENTS FOR ZONE AND ANTICIPATED PARKING FOR
EMPLOYEES/CUSTOMERS** _____

NAME, ADDRESS & TELEPHONE NUMBER OF OWNER _____

HAZARDOUS/COMBUSTIBLE MATERIALS (Attach Spec. Sheets) _____

PROPOSED CONSTRUCTION/SIGNAGE _____

Based on the decision of the Construction Official, your application may require an appearance before the Planning Board.

Applicant must conform to all Building, Electric, Plumbing, Fire and Board of Health Codes. This application is submitted to the Fire Dept. and Board of Health. These departments may request additional information.

APPLICATION FEE \$ 100.00 CHECK # _____ DATE _____