

REQUEST FOR CERTIFICATE OF OCCUPANCY RESIDENTIAL

Construction Official
Borough of North Arlington
214 Ridge Road
North Arlington, NJ 07031
Telephone: (201) 991-6060 Fax: (201) 998-9284

PROPERTY LOCATION:_____

BLOCK:_____ **LOT:**_____

CLOSING DATE:_____ **OPEN PERMITS**_____

CONTACT PERSON:_____

PHONE NO.:_____

_____ **HOUSE (ONE, TWO, MULTI)**
_____ **APARTMENT**

SELLERS NAME

BUYERS NAME

PHONE NO.:_____

PHONE NO.:_____

FEE_____

CHECK NO._____

CASH_____

_____ **WILL PICK UP CERTIFICATE**
_____ **MAIL CERTIFICATE TO:**

NAME:_____

ADDRESS:_____

CITY:_____ **STATE**_____ **ZIP**_____

Received Use of Building Affidavit: Yes:_____ No:_____

REQUEST FOR BUSINESS CERTIFICATE OF OCCUPANCY

Construction Official
Borough of North Arlington
214 Ridge Road
North Arlington, NJ 07031
Telephone: (201) 991-6060 Fax: (201) 998-9284

Business Location:_____

Block:_____ **Lot:**_____ **Square Feet:**_____

Type of Business:_____

Hours of Operation:_____ **No. of Employees:**_____

On-Site Parking:_____ **Redevelopment Area:**_____

Number of Seats:_____

Contact Person:_____ **Phone:**_____

Seller/Owner Information:

Name:_____

Address:_____

Phone No:_____

Buyer/Lessee/Renter Information:

Name:_____

Address:_____

Phone No:_____

Fees:	_____	_____	_____
	Amount	Cash	Check No.

Construction Official Approval:_____

Robert A. Kairys

Date Approved:_____

REQUEST FOR CERTIFICATE OF OCCUPANCY RENTAL UNIT

Construction Official
Borough of North Arlington
214 Ridge Road
North Arlington, NJ 07031
Telephone: (201) 991-6060 ex 178 fax: (201) 998-9284

PROPERTY LOCATION:_____

BLOCK:_____ **LOT:**_____

CLOSING DATE:_____

CONTACT PERSON:_____

PHONE NO.:_____

LANDLORDS NAME

TENANTS NAME

ADDRESS_____

ADDRESS_____

PHONE NO.:_____

PHONE NO.:_____

FEE_____

CHECK NO._____

CASH_____

**WILL PICK UP CERTIFICATE
MAIL CERTIFICATE TO:**

NAME:_____

ADDRESS:_____

CITY:_____ **STATE**_____ **ZIP**_____