

Borough of Roselle Park

110 Westfield Ave E. Roselle Park NJ 07204 908-245-2721

Zoning Application for Change of Commercial Tenancy Fee \$100

Date:		Block:	Lot:
Name of New Tenant:			
Address:			
Email Address:			
Owner's Name:			
Address:			
Email Address:	Phone N	Number:	
Location of Commercial Space:			
Current Use of Space:			
Proposed Use of Space:			¥
Will any type of work need to be don	ne? Example: new floors, new cou	nters, removal	of existing fixtures,
Renovation, Alteration, Reconstruction	on, or Repair: Yes or No		
If Yes, please describe:			
*If a food service establishment is go	ing into the space please contact Jo (908) 789-4070 x 4078. *** Internal Use Only: *	-	
Date:	Approved / Denied	Zone	e:
Cash/Check/ Money Order #:	Receipt #:	Permi	t #:
Zoning Officer		Fire Prevent	ion Officer
*If a applicable:			
	Jesse Powpll/ Health Departmen	t	