

**NEW BUSINESS APPLICATION**

**The Borough of Highland Park – Zoning Dept.**

221 South 5<sup>th</sup> Avenue, Highland Park, NJ 08904  
Phone: (732) 777-6013 Fax: (732) 777-6017

**FOR OFFICE USE ONLY**

Check # \_\_\_\_\_  
Cash \_\_\_\_\_  
Receipt # \_\_\_\_\_  
Date: \_\_\_\_\_  
Collected By: \_\_\_\_\_  
Zoning Permit #: \_\_\_\_\_

Sign and return the completed application and the \$125.00 application fee to the Zoning Office at the address above.

**Please make checks payable to:  
The Borough of Highland Park**

1. **Subject Property**  
Address: \_\_\_\_\_ Block: \_\_\_\_\_ Lot: \_\_\_\_\_ Zone: \_\_\_\_\_

2. **Business Owner**  
Name: \_\_\_\_\_ Address: \_\_\_\_\_ Phone: \_\_\_\_\_  
email: \_\_\_\_\_

3. **Property Owner**  
Name: \_\_\_\_\_ Address: \_\_\_\_\_ Phone: \_\_\_\_\_  
email: \_\_\_\_\_

4. **Indicate CURRENT or most recent use of property:**  
\_\_\_\_ Retail \_\_\_\_ Office \_\_\_\_ Other \_\_\_\_\_

5. **Indicate PROPOSED use of property:**  
\_\_\_\_ Retail \_\_\_\_ Office \_\_\_\_ Other \_\_\_\_\_

6. **Name and type of proposed business:** \_\_\_\_\_

a. Square footage of building to be used: \_\_\_\_\_

b. Proposed number of employees during maximum work shift: \_\_\_\_\_

c. Hours/days of operation: \_\_\_\_\_ d. Anticipated parking requirements: \_\_\_\_\_

7. To the best of your knowledge, have development restrictions been placed on the property or have prior Board approvals been required?  Yes  No

If yes, please describe the restrictions and/or provide dates of Board approvals:

\_\_\_\_\_  
\_\_\_\_\_

**CERTIFICATION:** I/We certify that the statements provided herein are true and accurate:

\_\_\_\_\_  
Business Owner Signature Date

\_\_\_\_\_  
Property Owner Signature Date

**Based on information submitted & requirements of the Borough's Land Use Ordinance, this application is:**

- Approved:**  Building Permit Required  Business License Required  Health Dept. Review Required  
 Inspections Required:  Fire  Health Department
- Denied**

**COMMENTS:** \_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Signature of Zoning Officer Date