

Office Use Only: Check/MO # _____

Zoning Permit # _____

Date Received _____

Date Completed _____



BOROUGH OF SOUTH PLAINFIELD

Zoning Official, Richard M. Wolff

2480 Plainfield Ave, South Plainfield, NJ 07080

Tel: 908-226-7630 Email: rwolff@southplainfieldnj.com

COMMERCIAL ZONING PERMIT APPLICATION

Please complete this form and return with a check/money order for \$125 payable to the Borough of South Plainfield. If approved, you will receive a Zoning Permit. If denied, you will be given instructions on how to apply to the Zoning or Planning Board, if applicable. **A copy of the property survey MUST be submitted for accessory improvements or additions showing the location and dimensions of the proposed improvement, including distances to nearby lot lines.**

1. Address of Property for Zoning Permit _____

2. Applicant Name & Address _____

3. Name of Business _____

4. Name of Owner (if different) _____

5. Applicant Phone Number & Email _____

6. Zoning District _____ Block _____ Lot _____

7. Current Use _____

8. Proposed Use or Improvement _____

9. Description of Business _____

Signature _____

Date _____

New Businesses Only

Please submit a copy of the following information. Your application will be denied or delayed if you do not.

- Business Formation Document or Sole Proprietor Long Form
- DBA (Doing Business As) or Alternate Name Document (if applicable)
- Tax ID letter from the IRS or W-9 form
- Owner's NJ State license (Cosmetology, Medical, Contractors, etc.) (if applicable)
- If changes are being proposed to the property, a survey or drawing detailing the extent of the work to be performed

If approved, a CO application must be filed with the South Plainfield Building Department and Construction Permits may be required. Do not sign a lease or move into a location before Zoning approval is given. You may be issued a summons and required to stop all operations if you open without proper authorization.