



BUILDING DEPARTMENT
Stephen Depken
Construction Official
201-599-6322

Application for Change of Tenancy/Ownership -Business

Date: _____ Block: _____ Lot: _____ Zone: _____

Property Address: _____

Name of Property Owner/Landlord: _____

Address: _____ Phone: _____

Name of Buyer/Tenant: _____

Address: _____ Phone: _____

Type of Business: _____

Days & Hours of Operation: _____

Name of Business: _____

- 1. SIGNS OR REPLACEMENT OF SIGNS REQUIRES A PERMIT.**
- 2. WINDOW SIGNS ARE LIMITED TO 20% OF ENTIRE WINDOW ONLY.**
- 3. PLEASE REGISTER WITH THE RIVER EDGE POLICE DEPARTMENT FOR EMERGENCY CONTACT IN CASE OF AN EMERGENCY.**

Signature of Owner, Tenant or Agent: _____

The following must be installed in every business in River Edge, prior to opening

1. Exit lights with battery back-up over all exits.
2. Emergency lights
3. One 10lb ABC all purpose fire extinguisher by all exit doors.

OFFICE USE ONLY

Approved by: Zoning Officer: _____ Date: _____
Fire Prevention: _____ Date: _____
Health Department: _____ Date: _____