



Borough of Emerson  
Fire Prevention  
Bureau  
201-262-6086 ext. 1215

**Application for COMMERCIAL Certificate of Occupancy  
(Per Ordinance 1617-20)**

Fee: \$250.00

(Closing/Occupancy) Date \_\_\_\_\_

1. Property Location (Address): \_\_\_\_\_

Block \_\_\_\_\_ Lot \_\_\_\_\_ Zoning Class \_\_\_\_\_

2. Name of Seller: \_\_\_\_\_

3. Name of Owner: \_\_\_\_\_

4. Name of Buyer: \_\_\_\_\_

5. Name of Tenant: \_\_\_\_\_

6. Present or Previous Type Business: \_\_\_\_\_

7. Proposed Business: \_\_\_\_\_

8. Description of Operation: \_\_\_\_\_

I (We) hereby certify that I (We) have read this application thoroughly and agree to conform to the Zoning Ordinance of the Borough of Emerson 290-44.1

\_\_\_\_\_  
Signature of Applicant

**IMPORTANT! In the event of a schedule change, please provide contact name/number.**

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Inspected by: \_\_\_\_\_ Date: \_\_\_\_\_

Comments: \_\_\_\_\_