

# Township of Livingston

## Instructions for Commercial Zoning Permits

All applicants for zoning approvals are required to submit the following:

- 1) Completed zoning application form and checklist.
- 2) Checks made payable to the Township of Livingston for:  
**\$140.00 for all Commercial Zoning Permits. Including all accessory structures.**
- 3) When submitting your commercial zoning application, you must include 1 copy of a sealed / engineered site plan with parking layout (no older than 5 years). ***If multiple tenants are using the parking lot, please list all tenants, the square footage of their spaces (net & gross floor area) and the use of their space (retail, medical, etc.) See checklist for submission requirements. If application does not have the above plans submitted it will be automatically denied.***
- 4) Depending on the scope of the work proposed you may be required to submit a building permit application to the construction department along with a lot surface drainage permit application for the engineering department.

***\*\*All Zoning Permits expire within one year of issuance if work is not completed.\*\****

# Township of Livingston COMMERCIAL CHECKLIST

**Before any permits can be issued, an approved Zoning Permit is required from the Zoning Review Officer / Zoning Officer. The following information is required as part of the Zoning Permit process.**  
**If required information is missing from application, it will not be accepted.**

<b>FOR:</b>	<b>PROVIDE:</b>	<b>Yes</b>	<b>No</b>
Change of Use Change of Tenancy Change of Ownership	1) Zoning Permit application indicating current use/tenancy and proposed use/tenancy 2) Floor plan of space showing square footage, walls, rooms, seating, etc. 3) Survey or site plan showing parking spaces and dumpsters 4) Zoning Permit Fee <b>CONTINUING CERTIFICATE OF OCCUPANCY IS REQUIRED BY THE            BUILDING DEPARTMENT</b>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

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

\_\_\_\_/\_\_\_\_/\_\_\_\_\_  
Date

\_\_\_\_\_  
Received by

\_\_\_\_/\_\_\_\_/\_\_\_\_\_  
Date

**TOWNSHIP OF LIVINGSTON**  
**COMMERCIAL ZONING APPLICATION**

***Permit Fee: \$140.00***

***(Cash or check payable to Township of Livingston)***

After receiving zoning approval, you **must** apply for a CCO or a building permit for interior alterations. CCO fees are \$150 and inspections are scheduled by calling 973-535-7953.

Building Address: \_\_\_\_\_

Block: \_\_\_\_\_ Lot: \_\_\_\_\_ Zone: \_\_\_\_\_

Type of Application: \_\_\_\_\_ Change in Ownership \_\_\_\_\_ Change in Tenant

Current Use of Property: \_\_\_\_\_ Proposed Use of Property: \_\_\_\_\_

**Property Owner Information:**

**Applicant Information:**

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

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

Address: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

City: \_\_\_\_\_

State, Zip code: \_\_\_\_\_

State, Zip Code: \_\_\_\_\_

E-mail: \_\_\_\_\_

E-mail: \_\_\_\_\_

Phone #: \_\_\_\_\_

Phone #: \_\_\_\_\_

**Proposed Work: Must describe proposed work in detail.** Include length, width, and height for all proposed improvement, Building Improvements (detailed description of proposed renovations, other than general painting):

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

**Proposed New Tenant Information:** Hours of Operation: \_\_\_\_\_

Days Open: Circle all that apply: Monday, Tuesday, Wednesday, Thursday, Friday, Saturday, and Sunday  
Number of Employees: \_\_\_\_\_, Number of Occupants: \_\_\_\_\_, Square Footage being Leased / Sold: \_\_\_\_\_,  
Existing Parking: \_\_\_\_\_, Required Parking: \_\_\_\_\_

I certify that the answers to the above-referenced questions and any statements made on the survey map, plot plan and seating and parking plans are true and complete to the best of my knowledge. I understand that this permit does not exempt bearer of responsibility to secure a Certificate of Occupancy, Building Permit, Engineering Permits, Board of Health approvals, or other permits as required by municipal, county, state or federal agencies. ***Any incorrect or falsified information will render this application void and any approvals based on it. Any changes to this approval or plans must be resubmitted for review prior to the installation. I am authorizing any and all Municipal Inspectors to come onto my property to inspect any and all work.***

**Applicant Signature** \_\_\_\_\_ **Date** \_\_\_\_\_