



Borough of Palisades Park

275 Broad Avenue

Bergen County, N.J. 07650

Building Department

Tel: (201) 585-4108

Fax: (201) 585-4110

MIXED USE

OWNER CERTIFICATE

FEE: \$400.00 + \$75.00 EACH RESIDENTIAL UNIT - PAYABLE TO BOROUGH OF PALISADES PARK

Today's Date: _____ Anticipated Closing Date: _____

PROPERTY INFORMATION

Property Address: _____

Property Currently Used As: _____

of units: RESIDENTIAL ____ COMMERCIAL ____ INDUSTRIAL ____ BUSINESS ____

Is the property vacant: **YES or No** If NOT VACANT, what is/are the name of the business(es) operating out of this property?: _____

Type of business(es): _____

Current signage at the property: Awning _____ Wall Sign _____

PRESENT OWNER INFORMATION

**Present owner of property as appears on deed. If Corp. list full name of C.E.O
LLC's Must Include Actual Name of Manager/Principal or application will be rejected**

PRESENT OWNER'S NAME: _____

ADDRESS: _____ EMAIL: _____

Daytime phone # of PRESENT OWNER: H: _____ C: _____

BUSINESS OWNER INFORMATION

LLC's Must Include Actual Name of Manager/Principal or application will be rejected

Business Owner's Name: _____

Business Owner's Address: _____

Business Owner's Telephone Number: _____ Cell Phone # _____

PURCHASER'S INFORMATION

**Purchaser of property as it will appear on deed. If Corp. list full name of C.E.O
LLC's Must Include Actual Name of Manager/Principal**

PURCHASER'S NAME: _____

PURCHASER'S COMPLETE ADDRESS: _____

Telephone # of PURCHASER: _____ EMAIL: _____

NAME OF PERSON WHO BE AT THE INSPECTION AND TELEPHONE NUMBER:

NAME: _____ CELL NUMBER: _____

***APPLICATION MUST CONTAIN ORIGINAL SIGNATURES AND BE NOTARIZED**

PURCHASER Signature

SWORN TO AND SUBSCRIBE TO
ME BEFORE ON THIS ____ DAY
OF _____, 20____

PURCHASER Name (PRINT)

**PLEASE NOTE THERE WILL BE A \$75.00 REINSPECTION FEE FOR EACH
ADDITIONAL INSPECTION.**

DO NOT WRITE BELOW THIS LINE

Inspection Date: _____ Inspector: _____ Inspection Results: _____

() NFPA REPORT PROVIDED



Borough of Palisades Park

Bergen County, N.J. 07650

BUREAU OF FIRE PREVENTION
275 BROAD AVENUE
PALISADES PARK, NEW JERSEY 07650
PHONE: (201) 585-4132
FAX: (201) 944-8059



APPLICATION FOR A SALE CERTIFICATE

PROPERTY ADDRESS: _____ APT/UNIT # _____

CHECK ONE: 1 FAMILY: _____ 2 FAMILY: _____ 3 FAMILY: _____ 4+ FAMILY: _____ CONDO: _____
DUPLEX: _____ CO-OP: _____ TOWNHOUSE: _____ COMMERCIAL: _____ RESIDENTIAL/COMMERCIAL: _____

PROPERTY OWNER'S NAME: _____

PROPERTY OWNER'S ADDRESS: _____

PROPERTY OWNER'S PHONE: _____ PROPERTY OWNER'S EMAIL: _____

BUYER'S NAME: _____

BUYER'S ADDRESS: _____

BUYER'S PHONE: _____ BUYER'S EMAIL: _____

SIGNATURE

PRINT NAME

FEE: \$ _____ CHECK # _____

MAKE CHECKS PAYABLE TO: PALISADES PARK FIRE PREVENTION BUREAU

ONE/TWO FAMILY	\$100.00
ALL OTHERS PER UNIT	\$100.00