

**TOWNSHIP OF HILLSIDE  
BUILDING DEPARTMENT**

**Certificate of Continued Occupancy**

**FEES FOR RESIDENTIAL USE:** \$150 for the 1<sup>st</sup> dwelling and \$75.00 for each additional unit; maximum \$400.

**FEES FOR COMMERCIAL OR INDUSTRIAL:** \$400 – NEW OWNER \$300 – CHANGE OF TENANT

**NEW BUILDING or ADDITION:** In case of a new building or addition 12% of total construction fee; minimum \$300.

(Make check payable to: **TOWNSHIP OF HILLSIDE**)

\*It is the responsibility of the applicant to contact this office for an inspection date (973) 926-5100\*

**\*Attention to all Retail Food Businesses:**

**Before you start the application, please visit the Health Department first. \***

**\*MUST OBTAIN SMOKE CERTIFICATE FROM FIRE DEPARTMENT (908) 352-1700\***

Application is hereby made by: \_\_\_\_\_ (Tenant/Owner/Other) for a Certificate of Continued Occupancy  
for the (Dwelling/Business/Store) located at \_\_\_\_\_. Anticipated Closing Date: \_\_\_\_\_, 20 \_\_\_\_.

CURRENT HOMEOWNER(S) NAME: \_\_\_\_\_

**RESIDENTIAL**

\_\_\_\_ Single-Family Dwelling      \_\_\_\_ Two-Family Dwelling      \_\_\_\_ Multiple-Family Dwelling \_\_\_\_ family unit(s)

**NON-RESIDENTIAL**

\_\_\_\_ New Owner      \_\_\_\_ Change Tenant      Name of Business: \_\_\_\_\_

Type of Business: \_\_\_\_\_ New Owner Name: \_\_\_\_\_

Does the premises have a required fire suppression system / fire detector system? \_\_\_\_ Yes \_\_\_\_ No

In addition to the customary usual or normal use or occupancy noted above I/We propose to use these premises for the following:

No alterations, additions or other changes will be made in or to the above building, nor will the use of occupancy have changed from the requested without first notifying the Building Department of the Township of Hillside and making a new application.

Print Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

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

Signature: \_\_\_\_\_ Email Address: \_\_\_\_\_

Name(s) of Purchaser/Tenant: \_\_\_\_\_ Phone Number: \_\_\_\_\_

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

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

By signing this form, the applicant acknowledges that he/she has read and received a copy of: The Rules & Regulations for obtaining a Certificate of Continued Occupancy in the Township of Hillside, DCA Division of Fire Safety memorandum, DPW Waste Rules and Regulations and the Solid Waste/Recycling Collection Schedule.

NOTE: ANY CERTIFICATE OF CONTINUED OCCUPANCY GRANTED WILL BE SUBJECT TO FUTURE ORDINANCE WHICH ARE CURRENTLY BEING UPDATED AS OF THE ANNIVERSARY DATE OF THE CERTIFICATE OF OCCUPANCY.