

Date Issued: 1/4/2023 Application Number: ZC-24 Application Date: 10/5/2022 Project Number: Permit Number: ZC-24 Fee: \$100.00

## **ZONING CERTIFICATE**

Worksite 1 GODWIN AVE

Location: STUDIO 31

Midland Park Borough, NJ

Owner:

1 GODWIN AVE LLC

Address: 1 GODWIN AVE

**MIDLAND PARK, NJ 07432** 

Applicant: 13 SAINTS SALON LLC, GIANNA ZOCCO

Address: 275 LAFAYTETTE AVE

LYNDHURST, NJ 07071

		STATE OF THE STATE	
Block: 3 Lot: 24.01	Qualifier:	Zone: <b>B-3</b>	
This Certifies that an application for the is	suance of a ZONING CE	RTIFICATE has been exam	nined.
Present Use: (None)			
☐ Non Conforming Use Proposed Use: Personal Service: Beaut	y Salon	Non Conforming Structure	
Work Description:			
ZONING CERTIFICATE - NON-RESID	ENTIAL - Name of Occu	pant: 13 SAINTS SALON I	_LC
Area of Building Sq Ft.: 7174			
Area of Occupant SqFt: 210			
Section of Bldg: UNIT 31			
PREVIOUS TENANT: N/A			
Application Approved Date: 1/5/2023			
Jpon review it was determined that the ZC	ONING CERTIFICATE:		
<ul> <li>✓ Permitted by Ordinance</li> <li>☐ Permitted by Variance approved on:</li> <li>☐ Approved with Conditions</li> <li>☐ Valid Nonconforming Use/Structure if</li> <li>☐ Zoning Board of Adjustme</li> </ul>	is established by	Zoning Officer	

Mal Bung Mark Berninger Zoning Official

1/5/2023 Date

## APPLICATION FOR ZONING CERTIFICATE FOR NON-RESIDENTIAL USE

\$100 APPLICATION FEE PAYABLE TO "BOROUGH OF MIDLAND PARK"

Check#

280 Godwin Avenue Borough of Midland Park, NJ 07432

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STREET ADDRESS OF PROPERTY:	d Park	ZONE:	BLOCK.	24.01
NAME OF OCCUPANT: **  3 Saints Salon LC  AR	EA OF BLDG SQ.FT	AREA OF OC	CUPANT-SQ.FT.	SECTION OF BLDG.
SOLE PURPOSE OF OCCUPANY/PLANNED USE (INCLUI	DING PRODUCTS OR	SERVICES SOLD/MANU	FACTURED):	
cosmetologist H	TIR CUT	trg, color	ing and	styling
PREVIOUS TENANT, IF APPLICABLE:	NA			
NAME OF APPLICANT – IF A CORPORATION, NAME AND	ADDRESS OF INDIV	IDUAL MAKING APPLICA	ATION:	
APPLICANT'S ADDRESS: 275 LOGO	ayette	Are Lyno	thurst N	507671
APPLICANT'S PHONE: 973-856-3	3418 e-mail: 1	uarilyn6).sdas	alons.com V	iristiana@solasabi
NAME OF OWNER OF BUILDING:		s of owner: odwin Aveni	re Midlard	fark NS
CERTIFICATION THAT ALL CONDITIONS OF SITE PLAN A	AND BUILDING PERM	IT HAVE BEEN MET:	(PROPERTY C	DWNER SIGNATURE)
		PANTS OF BUILDING		
Name:		ype of Business:		
Incoming Shipments  Number Weekly: 1	PROD	<u>UCT</u>	СОММ	ENTS
Outgoing Shipments  Number Weekly:				-
	DAILY CUSTOMERS/	VISITORS: WIL	L YOU DEAL WITH TH	E GENERAL PUBLIC? NO
HOURS OF OPERATION: From	то3_	NUMBER OF DA	YS OPEN WEEKLY:	_5
Hallons Per Customer plus or External Minus	ENT OF NOISE:	Regual THER NUISANCES:	Salon 1	bise
NY FLAMMABLES OR EXPLOSIVES USED OR STORED? - YES, EXPLAIN	NO	YES		
ROPOSED PERIOD OF OCCUPANCY: FROM	3/28/202	7 то Д	greement 1	Lenewed Amually
te: A SIGN PERMIT IS REQUIRED FOR ANY NEW SIGNS OHIBITED	OR SIGN CHANGES -	- FLAGS AND BANNERS	ALSO REQUIRE PER	MITS. NEON SIGNS ARE
EACH OCCUPANT MUST HAVE ITS OWN CERTIFICATE O	F OCCUPANCY. IF Y	OU VACATE, THE NEW	OCCUPANT WILL REC	
DILICANE DISTRICTION DATE	1		D4.75	11/2/20