

Date Issued: 3/22/2023 ZC-32 Application Number: 3/21/2023 Application Date: Project Number: Permit Number: ZC-32 Fee: \$100.00

# **ZONING CERTIFICATE**

Worksite 1 GODWIN AVE

Location: STUDIO 4

Midland Park Borough, NJ

Owner: 1 GODWIN AVE LLC

Address: 1 GODWIN AVE

Applicant: NICOLE PAPINO

Address: 1370 OXFORD ST

MIDLAND PARK, NJ 07432					MAHWAH, NJ 07430		
Block:	3	Lot:	24.01	Qualifier:	Zone: B-3		
This C	ertifies that an	applicatio	n for the issua	ance of a ZONING	CERTIFICATE has been	examined.	
Preser	nt Use: (None)						
	Non Conformir sed Use: <b>Perso</b>		ce: Waxing &	& Skin Care	☐ Non Conforming Stru	ıcture	
Work E	Description:						
	ING CERTIFIC e of Occupan		WAX STUDIO	O LLC			
Area	Area of Building Sq Ft.: 7174						
Area	Area of Occupant SqFt: 105						
Sect	ion of Bldg: S	TUDIO 4					
PRE	VIOUS TENAN	NT: N/A					
Applica	ation Approved	Date: 3/2	23/2023				
Upon r	eview it was de	etermined	that the ZON	ING CERTIFICAT	E:		
□ P		ariance ap Conditions rming Use		established by	☐ Zoning Officer		

Mark Berninger Zoning Official

3/23/2023 Date

## APPLICATION FOR ZONING CERTIFICATE

MAR 2 1 2023

FOR NON-RESIDENTIAL USE \$100 APPLICATION FEE 280 Godwin Avenue PAYABLE TO "BOROUGH OF MIDLAND PARK" BUILDING DEPT. Borough of Midland Park, NJ 07432 Check # ZONE: STREET ADDRESS OF PROPERTY: BLOCK SOLE PURPOSE OF OCCUPANY/PLANNED USE (INCLUDING PRODUCTS OR SERVICES SOLD/MANUFAČTURED): PREVIOUS TENANT, IF APPLICABLE: NAME OF APPLICANT - IF A CORPORATION, NAME AND ADDRESS OF INDIVIDUAL MAKING APPLICATION: APPLICANT'S ADDRESS: E-MAIL: M APPLICANT'S PHONE: NAME OF OWNER OF BUILDING: CERTIFICATION THAT ALL CONDITIONS OF SITE PLAN AND BUILDING PERMIT HAVE BEEN MET: OWNER SIGNATURE) LIST OF ALL OTHER OCCUPANTS OF BUILDING Type of Business: Name: Incoming Shipments TYPE CONVEYANCE PRODUCT COMMENTS Number Weekly: **Outgoing Shipments** Number Weekly: NUMBER OF PEOPLE: NUMBER OF DAILY CUSTOMERS/VISITORS: WILL YOU DEAL WITH THE GENERAL PUBLIC? Min NO NUMBER OF DAYS OPEN WEEKLY: HOURS OF OPERATION: GALS. WATER USED: EXTENT OF NOISE: OTHER NUISANCES: **FUMES OR ODORS:** NO ANY FLAMMABLES OR EXPLOSIVES USED OR STORED? YES IF YES, EXPLAIN PROPOSED PERIOD OF OCCUPANCY:

Note: A SIGN PERMIT IS REQUIRED FOR ANY NEW SIGNS OR SIGN CHANGES - FLAGS AND BANNERS ALSO REQUIRE PERMITS. NEON SIGNS ARE PROHIBITED

APPLICANT SIGNATURE

\*\* EACH OCCUPANT MUST HAVE ITS OWN CERTIFICATE OF OCCUPANCY. IF YOU VACATE, THE NEW OCCUPANT WILL REQUIRE A NEW CERTIFICATE

### **Zoning Certificate Checklist**

/							
1. Is the property located in the I-1 or I-2 Zone? YesNo/.							
2. If yes, the application must be submitted to the Planning Board pursuant to 34	If yes, the application must be submitted to the Planning Board pursuant to 34-21.3d.						
3. Is the Proposed use permitted? YesNo							
4. If no, application must be made to the Zoning Board of Adjustment.							
5. Is there an increase in the parking requirements for the proposed over the pre	vious use?						
YesNo							
6. If no, skip to question #9.							
7. If yes, dees the site have enough parking spaces to meet the requirements of t	:he Zoning Ordinance?						
YesNo							
8. If the answer to question #7 is no, an application must be made to the Zoning	Board for a Parking						
variance.							
9. Is there an accurate site plan, existing conditions plan, or an As-Built drawing of	on file, approved by the						
Planning Board or Zoning Board? YesNo							
1. If the property is in the I-1 or I-2 zone, the applicant must submit a plan and pa	arking analysis to the						
Planning Board for approval.							
2. If the property is in the B-1, B-2, or B-3 Zone, the zoning officer at his discretio	n, <u>may</u> approve the plan						
and parking analysis for the purposes of issuing the Zoning Certificate.							
NAME OF APPLICANT Glow Wax Studio LLC  ADDRESS I GOJWIN AVE BLOCK 3 LOT 24.0/ ZONE							
10 1: A = 2 1077/ 2/ 2015	2 2						
PREVIOUS TENANT PREVIOUS USE							
UNIT# 4 AREA Sq. Ft. 105 PROPOSED USE WAKING , SKIN CARE							
UNIT# 7 AREA Sq. Ft. 105 PROPOSED USE WARING , SKIN CARE							
CHANGES							
RELOCATION?PHONE_201-139-2129_EMAIL							
RELOCATION!PHONEPHONE							
Board of Health Approval Required – YesNo							
DATE 3 122 123 ZONING OFFICIAL MANAGE APPROVED-Yes No							
UCC USE GROUP: PREVIOUS USE B PROPOSED USE CCO REQUIRED?	No						



Date Issued: 3/23/2023 Application Number: ZC-33 3/21/2023 Application Date: Project Number: Permit Number: ZC-33 \$100.00 Fee:

## **ZONING CERTIFICATE**

Worksite 1 GODWIN AVE Location: STUDIO 3

Midland Park Borough, NJ

Owner: 4 CODMIN AVELLO

Andiocate MATAQUA SA DIVEDA

Address: 1 GODWIN AVE MIDLAND PARK, NJ 07432					Address: 110 REA AVE HAWTHONE, NJ 07406			
Block:	3	Lot:	24.01	Qualifier:		Zone: B-3		
This Ce	rtifies that an a	pplication	for the issuance	ce of a ZONING	CERTIFI	CATE has been ex	amined.	
Present	Use: Persona	al Service	: Beauty Salo	n				
	lon Conforming d Use: <b>Perso</b> r		e: Beauty Sal	on	☐ Non	Conforming Struct	ure	
Work De	escription:							
	NG CERTIFICA of Occupant:		_C					
Area	of Building So	Ft.: 7174	ı					
Area	Area of Occupant SqFt: 143							
Section	on of Bldg: ST	UDIO 3						
PREV	IOUS TENAN	T: AMELI	A BOLTEN					
Applicat	ion Approved [	Date: 3/23	3/2023					
Upon re	view it was det	ermined t	hat the ZONIN	G CERTIFICATE	≣:			
□ Pe		iance app onditions ning Use/	roved on: Structure is est Adjustment	ablished by	☐ Zor	ning Officer		
		_						

Mark Berninger Zoning Official

3/23/2023 Date

#### APPLICATION FOR ZONING CERTIFICATE FOR NON-RESIDENTIAL USE

REC'D AT BORO OF MIDLAND PARK

\$100 APPLICATION FEE PAYABLE TO "BOROUGH OF MIDLAND PARK"	280 Godwin Avenue		MAR 2	1 2023
Cash \$100 V Check # (AS)	Borough of Midland Park, N	J 07432	BUILDING	3 DEFT
STREET ADDRESS OF PROPERTY:	and Park	zone: B-3	BLOCK:	LOT: 24,0
NAME OF OCCUPANT: ** TOSO LLC	AREA OF BLDGSQ.FT.	AREA OF OCCUPANT		ction of BLDG.
SOLE PURPOSE OF OCCUPANY/PLANNED USE (IN	CLUDING PRODUCTS OR SERVICE	1 \		Υ
coloring				
PREVIOUS TENANT, IF APPLICABLE: A	elia Bolten			
NAME OF APPLICANT – IF A CORPORATION, NAME NATACHA M. RIVE FO		AKING APPLICATION:		
APPLICANT'S ADDRESS: 110 Rec	, Aye, Hawtho	kne N3	07506	- Comment
APPLICANT'S PHONE: 862-282	2920 E-MAIL: Mar	lyn@saasalo	ns. com, he	stiana Osola
NAME OF OWNER OF BUILDING:	ADDRESS OF OW	NER:		Park NS
CERTIFICATION THAT ALL CONDITIONS OF SITE P	LAN AND BUILDING PERMIT HAVE	BEEN MET:	PROPERTY OWNER:	
	IST OF ALL OTHER OCCUPANTS			
Name:	Type of B	usiness:		
NA		× 100 - 117		
				120.201.000
Incoming Shipments TYPE CONVEYA	NCE PRODUCT		COMMENTS	
Outgoing Shipments Number Weekly:				
NUMBER OF PEOPLE: NUMBE	R OF DAILY CUSTOMERS/VISITOR	s: WILL YOU D	EAL WITH THE GENE	RAL PUBLIC?
HOURS OF OPERATION: From dan	1 то 3рт	NUMBER OF DAYS OPE	N WEEKLY:	2
GALS. WATER USED: 46allons per customer for-	EXTENT OF NOISE: PLA	ular Sala	n Noise	er wee
ANY FLAMMABLES OR EXPLOSIVES USED OR STO		YES		
PROPOSED PERIOD OF OCCUPANCY: FROM	03/20/2023	to Agreen	rent Renews	ed Annuallu

Note: A SIGN PERMIT IS REQUIRED FOR ANY NEW SIGNS OR SIGN CHANGES - FLAGS AND BANNERS ALSO REQUIRE PERMITS. NEON SIGNS ARE **PROHIBITED** \*\* EACH OCCUPANT MUST HAVE ITS OWN CERTIFICATE OF OCCUPANCY. IF YOU VACATE, THE NEW OCCUPANT WILL REQUIRE A NEW CERTIFICATE

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	ã.	Is the Proposed use permitted? Yes No					
	4.	If no, application must be made to the Zoning Board of Adjustment.					
	5.	Is there an increase in the parking requirements for the proposed over the previous use?					
		YesNo					
	6.	If no, skip to question #9.					
	7.	If yes, does the site have enough parking spaces to meet the requirements of the Zoning Ordinance?					
		YesNo					
	8.	If the answer to question #7 is no, an application must be made to the Zoning Board for a Parking					
		variance.					
	9.	Is there an accurate site plan, existing conditions plan, or an As-Built drawing on file, approved by the					
		Planning Board or Zoning Board? Yes No					
	Posterior						
	1.	If the property is in the I-1 or I-2 zone, the applicant must submit a plan and parking analysis to the					
		Planning Board for approval.					
	2.	If the property is in the B-1, B-2, or B-3 Zone, the zoning officer at his discretion, may approve the plan					
		and parking analysis for the purposes of issuing the Zoning Certificate.					
N	AME	OF APPLICANT TOSH LLC					
		44					
Α[	DDRI	ESS   Godwin Ave BLOCK 3 LOT24.01 ZONE B-3					
DD	) E\/I/	OUS TENANTPREVIOUS USE					
ST	NDI	TO S					
UI	NIT#	3 AREA Sq. Ft. 143 PROPOSED USE COSMETOLOGY-HAIR STYLING & COLORING					
Ch	IAN	GES					
RE	LOC	CATION?PHONE_862-282-2926_EMAIL					
В	pard	of Health Approval Required – Yes No					
D	DATE 3 122 123 ZONING OFFICIAL MAL BUNGS APPROVED-YES NO_						
U	cc u	SE GROUP: PREVIOUS USE $B$ PROPOSED USE $B$ CCO REQUIRED? $MO$					