



# The City of New Brunswick

Construction Division

Civic Square  
25 Kirkpatrick Street  
P.O. Box 269

New Brunswick, New Jersey 08903-0269  
Phone: 732 745-5075 Fax: 732 745 -5141

*Office Use Only*

USE GROUP: \_\_\_\_\_  
LIVE LOAD: \_\_\_\_\_  
CONST: \_\_\_\_\_  
OCC: \_\_\_\_\_  
USE: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## Certificate of Continuing Occupancy

Fee: \$150.00

*(Due once processed)*

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

Address of the building: \_\_\_\_\_

Name of Your business: \_\_\_\_\_

Name of Applicant: \_\_\_\_\_

Address of Applicant: \_\_\_\_\_

Phone Number of Applicant during business hours: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Name of Owner of the Building: \_\_\_\_\_

Address of Owner: \_\_\_\_\_

Phone Number of Owner of the Building: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Type of Business: \_\_\_\_\_

Residential: List work performed without permits: \_\_\_\_\_

A **COPY** of your **ZONING APPROVAL** must be attached to this form. All information must be completely filled out or it will not be processed. This application does not authorize you to occupy or commence with any form of construction. Any proposed construction requires permits and approval from the **CONSTRUCTION DIVISION**. **MERCHANT LICENSE** is required if this business will be selling products to the public.

Date of Application

Signature

### INSPECTORS' SIGN-OFFS:

BUILDING \_\_\_\_\_ NOT APPROVED \_\_\_\_\_  
PLUMBING \_\_\_\_\_ NOT APPROVED \_\_\_\_\_  
ELECTRICAL \_\_\_\_\_ NOT APPROVED \_\_\_\_\_  
FIRE \_\_\_\_\_ NOT APPROVED \_\_\_\_\_

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FEE: \_\_\_\_\_  
CCO #: \_\_\_\_\_  
CK #: \_\_\_\_\_  
DATE: \_\_\_\_\_  
BY: \_\_\_\_\_