MONROE TOWNSHIP DIVISION OF PLANNING & ZONING

TENANCY REVIEW

FEE: \$100.00 FOR NON-RESIDENTIAL

| DEPARTMENT: | ORIGINAL | TO | ZONING | OFFICER |
|-------------|----------|----|--------|---------|
| | | | | |

• FIRE PREVENTION

* CONSTRUCTION DEPT.

• HEALTH

- * TAX ASSESSOR'S OFFICE
- *RECYCLING COORDINATOR
- * CLERK'S OFFICE (ONLY Food Handlers)
- *ENVIRONMENTAL COMMISSION
- MTUD
- EMERGENCY MANAGEMENT

NOTE: PLEASE PRINT OR TYPE ANSWER TO ALL APPLICABLE QUESTIONS. IF NOT APPLICABLE, WRITE N/A.

| DATE | ; | APPLICATION #: |
|------|---|-------------------------------|
| 1. | NAME OF TENANT: | |
| 2. | NAME OF APPLICANT: | |
| | | |
| | | ON: |
| 3. | NAME OF PROPERTY OW ADDRESS: | NER: |
| | | |
| | | |
| 4. | NAME OF PROPERTY OWNER (MUST ATTACH WRITTEN PE | L'S ASSOCIATION: RMISSION) |
| 5. | BLOCK: LOT: ACREA | AGE: |
| | STREET ADDRESS | |
| | SO, FT OF BUILDING | |

| . FT | OF PROPOSED SPACE |
|------|---|
| | EXISTING OR PREVIOUS USE |
| | |
| | DESCRIBE MATERIAL (OTHER THAN HAZARDOUS) TO BE UTILIZED OR STORED ON SITE. SPECIFY QUANTITIES TO BE STORED OR HANDLED OVER DIFFERENT TIMI PERIODS. (WEEKLY, MONTHLY, OR YEARLY). DESCRIBE METHOD OF HANDLING THESE MATERIALS. |
| | |
| | |
| - | ANTICIPATED NUMBER OF EMPLOYEES (PER SHIFT) AND HOURS OF OPERATION |
| - | |

| | |
|---------------|---|
| | |
| TYPE GENEF | OSED WATER USAGE (TYPICAL DOMESTIC OR PROCESS RELATED). AND QUANTITY OF SOLID OR LIQUID (NON HAZARDOUS) WAST ATED AND METHOD OF DISPOSAL. A RECYCLING PLAN MUST BE SU |
| | |
| LOCAT | ION OF STRUCTURES, ROAD PARKING AREAS. SPACE TO BE C |
| LOCAT | T AN APPROVED SITE PLAN (AND FLOOR PLAN), INDICTION OF STRUCTURES, ROAD PARKING AREAS. SPACE TO BE CRENOVATION, IF NECESSARY) AND EXISTING ADJACENT LAND |
| LOCAT | ION OF STRUCTURES, ROAD PARKING AREAS. SPACE TO BE C |
| LOCAT | ION OF STRUCTURES, ROAD PARKING AREAS. SPACE TO BE C |
| LOCAT | ION OF STRUCTURES, ROAD PARKING AREAS. SPACE TO BE C |
| LOCAT | ION OF STRUCTURES, ROAD PARKING AREAS. SPACE TO BE C |

C. METHOD OF DELIVERY AND STORAGE (TYPES OF CONTAINERS AND LOCATIONS).

D. BUILT IN SPILL AND LEAK CONTAINMENT FEATURES: E.
BUILT IN FIRE PROTECTION FEATURES:

FEMERGENCY ACTION PLAN FOR FIRE, EXPOLSION SPILL OR LEAK: G.

DESCRIPTION OF WORST CASE SCENARIO:

H. SPECIAL FIRE FIGHTING OR SPILL CONTAINMENT EQUIPMENT AND TRAINING NEEDED:

DESCRIBE ANY POLLUTANTS OR NUISANCES THAT POTENTIALLY ENTER THE ENVIRONMENT AS A RESULT OF THE PROPOSED ACTIVITY, SUCH AS, AIR MISSION, SURFACE OR GROUND WATER DISCHARGES, WASTE WATER EFFLUENT, NOISE OR UNPLEASANT ODORS.

| ATTACH MTMUD APPROVAL LETTER/RES | OI LITION |
|--|---|
| | () . () () |
| | |
| IDENTIFY THE SIZE AND LOCATION OF SI | |
| | |
| IDENTIFY THE SIZE AND LOCATION OF SI | |
| IDENTIFY THE SIZE AND LOCATION OF SI | |
| IDENTIFY THE SIZE AND LOCATION OF SI | MILAR OPERATIONS. |
| IDENTIFY THE SIZE AND LOCATION OF SI | MILAR OPERATIONS. |
| TENANT'S NAME & TITLE | OWNER' S SIGNATURE |
| TENANT'S NAME & TITLE TENANT'S SIGNATURE | OWNER' S SIGNATURE |
| IDENTIFY THE SIZE AND LOCATION OF SIZE AND LOCATION | OWNER' S SIGNATURE |
| TENANT'S NAME & TITLE TENANT'S SIGNATURE DATE | OWNER' S SIGNATURE |
| IDENTIFY THE SIZE AND LOCATION OF SIZE AND LOCATION | OWNER' S SIGNATURE |