



**BOROUGH OF BERNARDSVILLE**  
**CONSTRUCTION / ZONING OFFICE**  
 1 ANDERSON HILL ROAD, SUITE 103  
 BERNARDSVILLE, NEW JERSEY 07924  
 (908) 766-3000 EXT. 129  
 Fax: (908) 766-1315

**CONSTRUCTION / ZONING RECORDS CLEARANCE CERTIFICATE**

Seller's Name \_\_\_\_\_

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

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone (\_\_\_\_) \_\_\_\_\_ Email \_\_\_\_\_

Property Address \_\_\_\_\_

Block \_\_\_\_\_ Lot \_\_\_\_\_  Single Family  Two Family  Condominium  3+ Family

Contact Person (Agent) \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_

Email \_\_\_\_\_ Closing Date \_\_\_\_\_ (required)

I hereby certify that I am the (agent) owner of record and I am authorized to make this application.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**FOR BOROUGH USE ONLY**

**Zoning Review:**

- Permitted Use Yes  No
- Open Zoning Permits Yes  No
- Open Zoning Violations Yes  No

**Conditional Approval:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Construction Review:**

- Open Permits Yes  No

\_\_\_\_\_

**Approval Issue Date:** \_\_\_\_\_ **Initials:** \_\_\_\_\_

Certificate# \_\_\_\_\_

Cash/Check# \_\_\_\_\_

**Application Fee:**

Date Submitted \_\_\_/\_\_\_/\_\_\_

- \$35.00 - Requests received **more than 10 calendar days** from change of occupancy/closing.
- \$75.00 - Requests received **within 10 calendar days** from change of occupancy/closing.