

TOWNSHIP OF WALL
APPLICATION FOR TRANSFER PERMIT

1. Present Owner's Name: _____
Address & Zip Code: _____
Phone Number: _____

2. Purchaser or Tenant's Name: _____
Address & Zip Code: _____
Phone Number: _____

3. Street Address of Property: _____
Block: _____ Lot: _____ Zone: _____
Unit or Suite Number: _____

4. Application is herewith made for permission to transfer (check appropriate):

I. Business or Industrial Use

a.) Ownership _____ b.) Tenancy _____

Trading As: _____

North American Industry Classification System Code: _____

II. Multiple Dwelling Complex, Multi-Unit Business, or Multi-Unit
Industrial Complex

a.) Ownership _____ b.) Tenancy _____

Trading As: _____

5. **MUST SUBMIT DETAILED LETTER STATING THE PROPOSED USE OF THE PROPERTY, WHICH MUST BE PREPARED BY PROSPECTIVE TENANT OR PURCHASER AND APPLICATION FEE OF \$50.00.** Checks to be made payable to Township of Wall.

6. The following information is required by the Land Use Office in order to process the application:

Name of Buyer's Attorney: _____

Complete Address of Buyer's Attorney: _____

Proposed Closing Date: _____

Signature: _____ Date: _____