



BOROUGH OF CHESTER

50 North Rd.
Chester NJ 07930
908-879-3660 EXT. 2115
zoning@chesterborough.org

NEW BUSINESS LICENSE PACKET

Below is a checklist for all items required before a business opens or if a commercial property changes ownership in Chester Borough. Some items may not be applicable depending on the type of business and/if work is being completed. The checklist is not applicable for Home Businesses. If you have any questions or concerns, please contact the Zoning Department. Your packet should include all forms filled out in its entirety, all fees, and documents listed below.

- 1.) Business License Application
- 2.) Fire Prevention Form
- 3.) Zoning Permit
 - a. If a new sign is to be installed, please include a drawing of the sign, along with dimensions.
 - b. If work is being done within a space, state the work being performed and attach a drawing of the proposed work.
- 4.) Food Establishment Plan Review Application & Food Establishment License (IF APPLICABLE)

Make sure you read all the applications and note what is needed.

Applications deemed incomplete will be denied.

If work is being performed, you will need to apply for a Construction Permit. Construction is the last step in the process and only after you have received all prior approvals.

Zoning Department

Sarah Jane Noll-Zoning Official/ Code Enforcement
Dena Dziergoski-Zoning Official
908-879-3660 EXT. 2115
Zoning@chesterborough.org

Health Department -Shared Services with Bernards Township

Virginia Bordonaro-BOH Secretary Chester Borough
908-879-3660 EXT.2128
Health@chesterborough.org

Construction Department

Dena Dziergoski-Technical Assistant to the Construction Official/LUB Secretary
908-879-3660 EXT. 2115
Construction@chesterborough.org



BOROUGH OF CHESTER

50 North Rd.
Chester NJ 07930
908-879-3660

zoning@chesterborough.org

OFFICE USE ONLY

Application #: _____

Approved: _____ Denied: _____

Reason: _____

Date Stamp: _____

BUSINESS PERMIT APPLICATION

TENANT INFORMATION

Name: _____

Address: _____

Block: _____ Lot: _____

Phone #: _____ Email: _____

OWNER INFORMATION

Name: _____

Address: _____

Block: _____ Lot: _____

Phone #: _____ Email: _____

Fees

\$125.00- Certificate of Existing
Non-Conformity

\$50.00- Zoning Verification
Letter

\$175.00- Business License

Checks made payable to The Borough of
Chester

() Change of Use () Change of Tenant () New Business

Describe in detail the intended use and dimensions of the space that is to be used:

Has the above premises ever been the subject to any prior applications to the Land Use Board to the applicants' knowledge? (If so, state the date of the application, results, and attach a copy of the decision.)

Hours of Operation: _____ Number of Employees: _____ Occupancy Load: _____

****Please provide a plan of the existing and proposed work to the space, etc. Make sure to provide all relevant information such as resolutions, copy of site plan, and prior use of approval for the property. ****

-PROVIDE PHOTOS OF THE AREA OF PROPOSAL-

- ✓ I certify that the information submitted is correct and that the location of the proposed shown on the submitted survey including setbacks, and all other pertinent dimensions and information is correct and will be built in compliance with app applicable provisions of The Borough of Chester Codes.
- ✓ I understand that if it is determined that the information provided is not correct, or the proposed location of the structure is not as shown on the submitted survey, The Borough of Chester Codes may institute the appropriate action or proceedings to abate the violation and I will be subject to penalties as per **Chapter 163-64 Violations and penalties.**
- ✓ Tenant, in addition to certifying the above, I certify that the proposed work is authorized by the owner, and I have been authorized by the owner to make this application on the owner's behalf.

Owner/Tenant's Name (print): _____ Signature: _____

Date: _____ Zone: _____



FIRE PREVENTION

BOROUGH OF CHESTER
50 NORTH RD.
CHESTER NJ 07930

Name of Business: _____
Name of Tenant: _____
Address of Business: _____
Block: _____ Lot: _____
Telephone Number: _____
Business Owner's Home Address: _____
Type of Business: _____
Owner's Email: _____
Signature: _____ Date: _____

Name of Landlord: _____
Address of Landlord: _____
Telephone Number: _____
Email: _____

Any hazardous materials on the premises?
Yes: _____ No: _____
If yes, explain:

<u>OFFICE USE ONLY</u>
Sent to Mount Olive Fire Marshal on:
Date: _____
Signature: _____



BOROUGH OF CHESTER

50 North Rd.
Chester NJ 07930
908-879-3660 Ext. 2115
zoning@chesterborough.org

ZONING PERMIT APPLICATION

Purpose: Obtaining a Zoning Permit is required before applying for a Certificate of Occupancy or a Building Permit. The purpose of a Zoning Permit is to ensure the building, structure and/or use complies with the zoning requirements of the Borough of Chester including setbacks, use, and building coverage. The owner and/or applicant will be notified within 10 business days from the date of receipt of this application that the Zoning Permit has been approved, denied (with reasons), or the application is deemed incomplete.

OWNERSHIP INFORMATION

Name: _____
Address: _____
Block: _____ Lot: _____
Phone #: _____ Email: _____
Owner's Signature: _____

APPLICANT INFORMATION (If different from ownership)

Name: _____
Address: _____
Block: _____ Lot: _____
Phone #: _____ Email: _____
Applicant's Signature: _____

- New Construction Addition Shed/Garage Deck Porch In-ground pool Above-ground pool
 Hot Tub Sign Change of Use Patio Gazebo Finished Basement Other _____

Describe in detail the intended use and dimensions of the structure, addition, shed, fence, etc., that is to be built or displayed:

Has the above premises ever been the subject to any prior applications to the Land Use Board to the applicants' knowledge? (If so, state the date of the application, results, and attach a copy of the decision. _____

- ✓ I certify that the information submitted is correct and that the location of the proposed shown on the submitted survey including setbacks, and all other pertinent dimensions and information is correct and will be built in compliance with app applicable provisions of The Borough of Chester Codes.
- ✓ I understand that if it is determined that the information provided is not correct, or the proposed location of the structure is not as shown on the submitted survey, The Borough of Chester Codes may institute the appropriate action or proceedings to abate the violation and I will be subject to penalties as per **Chapter 163-64 Violations and penalties.**
- ✓ Applicant, in addition to certifying the above, I certify that the proposed work is authorized by the owner, and I have been authorized by the owner to make this application on the owner's behalf.

Owner/Applicant Name (print): _____ Signature: _____

Date: _____ Zone: _____

OFFICE USE ONLY

Application #: _____
Approved: _____ Denied: _____
Reason:

Date Stamp:

Fees

\$50.00- Pools requiring building permits, fences, sheds, decks, patios, change impervious coverage & accessory structures, permanent signs & temporary banners
\$100.00- New house-addition & sidewalks

Checks made payable to The Borough of Chester

****Please provide a correctly scaled property survey with this application and show the proposed work drawn to scale including setbacks, height, and dimensions, etc. Provide photos of the area of proposal. ****



CHESTER BOROUGH HEALTH DEPARTMENT

Retail Food Establishment Plan Review Application

Name of Food Establishment: _____

Address of Food Establishment: _____

Phone Number at Food Establishment: _____

Owner's Name: _____

Owner's Address: _____

Owner's Phone Number: _____

Owner's Email Address: _____

Contractor Name/Address/Phone: _____

Brief Description of Food Establishment Type: _____

Signature: _____ Date: _____

PLEASE NOTE: This fee is *only* for the Health Department to review your Food Establishment application. Please provide a drawing of the kitchen, along with a copy of the menu and hours/days of operation.

This review is to make sure the establishment is up to the current code/standards of Chapter 24.

<p><u>Select License Type:</u></p> <p><input type="checkbox"/> New Establishment</p> <p><input type="checkbox"/> License Renewal</p> <p><input type="checkbox"/> Change of Ownership</p> <p>Fee for application: \$50.00</p>
--

<p><u>FOR OFFICE USE ONLY</u></p> <p>_____ Fees paid</p> <p>_____ Plans submitted</p> <p>_____ Check #</p> <p>_____ Date Paid</p>
