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 and Land Use Board
Sarah Jane Noll-Zoning Official/ Code Enforcement / Shade Tree Commission
908-879-3660 EXT. 2115
1) Zoning@chesterborough.org; 2) sjnoll@chesterborough.org

Health Department -Shared Services with Bernards Township
Deborah Johnston-BOH Secretary Chester Borough
908-879-3660 EXT.2126
Health@chesterborough.org

Construction Department
Eileen Molnar - Technical Assistant to the Construction Official
908-879-3660 EXT. 2123
Construction@chesterborough.org

BOROUGH OF CHESTER
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OFFICE USE ONLY
Application #: _____
Approved: _____ Denied: _____
Reason:

Date Stamp:

BUSINESS PERMIT APPLICATION

TENANT INFORMATION - Business Information

Name: _____

Address: _____

Block: _____ Lot: _____ Corporate name:_

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:

_____

_____

OFFICE USE ONLY

Sent to Mount Olive Fire Marshal on:

Date: _____

Signature: _____

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OFFICE USE ONLY
Application #: _____
Approved: _____ Denied: _____
Reason:

Date Stamp:

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.

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

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: _____

**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. **

( ) 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: _____

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.

Select License Type:

- ☐ New Establishment
- ☐ License Renewal
- ☐ Change of Ownership

Fee for application: $50.00

FOR OFFICE USE ONLY

_____ Fees paid

_____ Plans submitted

_____ Check #

_____ Date Paid

Borough of Chester
50 North Rd.
Chester, NJ 07930
908-879-3660 Ext. 2128

BOROUGH OF CHESTER HEALTH DEPARTMENT
50 North Rd.
Chester, NJ 07930
Telephone: 908-879-3660 Ext. 2128
Fax: 908-879-0122

APPLICATION FOR FOOD ESTABLISHMENT LICENSE

Type of Establishment (check one):

____ BAKERY	____ COFFEE SHOP	____ RESTAURANT
____ BUTCHER	____ CHURCH KITCHEN	____ SUPERMARKET
____ CAFETERIA-SCHOOL	____ DELICATESSEN	____ TAVERN
____ GROCERY STORE	____ PREP ESTABLISHMENT	____ MOBILE VENDOR
	____ OTHER-SPECIFY _____	

Name of Establishment: _____

Address of Establishment: _____

Name(s) of Owner(s): _____

Address of Principal Owner (s):

_____

Phone Number: _____ Email Address: _____

Seating Capacity: _____ Number of Employees: _____

ESTABLISHMENT FEE SCHEDULE

Supermarkets (with not more than 15 seats) -----$300.00
(with more than 15 seats) ---------$400.00
Store (without seats) ----------$ 175.00
Store selling only wrapped goods ----------$ 50.00
Restaurants/Cafeterias/Hotels with seats
Seats 1-25 Persons----------$175.00
Seats 26-75 Persons ----------$270.00
Seats Over 75 Persons----------$400.00

Mobile Vending/Cart ------- $100.00
Volunteer Firemen
For Events ---------- $35.00
Per Annum -------- $100.00
Church Having Kitchen ------$15.00
Roadside Stand ----------$135.00

Payment must be received by January 31st of the licensing year. Failure to comply is a violation. The penalty is a 50% surcharge of the license fee. Those who have not complied by March 31st of the licensing year, the surcharge is equivalent to the licensing fee or $100%.

In making this application, I hereby agree to conduct the operation of the food establishment in conformance with the provision of Chapter 24 of the New Jersey Sanitary Code and Chapter 244-S the Code of the Borough of Chester.

_____ _____
Signature of Applicant Please Print Name & Title

FOR OFFICE USE ONLY
Date Issued: _____
Date Expired: _____
Fee: _____
License #: _____

163 Attachment 1

Schedule 1 - Part 1
Schedule of Lot Area, Yard and Building Requirements
Borough of Chester
[Amended 1-22-2002 by Ord. No. 2002-3; 8-16-2005 by Ord. No. 2005-16; 7-18-2006 by Ord. No. 2006-19; 4-17-2007 by Ord. No. 2007-7]

Lot Area Requirements								Yard Requirements							Building Size Requirements[9]		
								Principal Building				Accessory Building					
Zone	Use	Minimum Area in Square Feet	Minimum Lot Width in Feet	Minimum Lot Depth in Feet	Maximum Density	Open Space: Maximum Percent of Lot Covered by Buildings and Structures	Maximum Percent of Lot Impervious Coverage	Front Yard in Feet	One Side Yard in Feet	Both Side Yards in Feet	Rear Yard in Feet	Front Yard in Feet	Side Yard in Feet	Rear Yard in Feet	Maximum Height in Stories	Maximum Height in Feet	Minimum Gross Floor Area in Square Feet (One Story)
RHD	Single-family	1 acre	150	150	1/lot	See [5]	See [5]	50	15	40	75	50	20	20	2	35	n/a
	Churches/schools/ libraries	4 acres	150	150	1/lot	20%	40%	75	30	60	50	75	20	20	2	40[2]	n/a
RLD	Single-family	2 acres	175[3]	150	1/lot	See [5]	See [5]	75	30	80	75	75	30	50	2	35	n/a
	Churches/schools libraries	8 acres	200	200	1/lot	20%	40%	75	30	60	50	75	20	20	2	40[2]	n/a
MH	Mobile home parks	8 acres	200	150		15%	40%	50	15	30	30	50	20	20	1	10	n/a
B1	Business	1/4 acre	100	75		50%	70%	10	--	5	20	10	--	--	2.5	35	n/a
B-1A	Business	1/4 acre	100	75	1/lot[8]	40%	60%	30[6]	15	30	30		10	10	2	30[7]	N/A
B2	Business	1/2 acre	125	100		30%	65%	50	15	30	30	50	15	20	2.5	35	n/a
B3	Business	1 acre	200	150		30%	65%	50	20	50	30	50	20	30	2.5	35	n/a
LBT	Limited business	1/2 acre	100	150		30%	60%	50	15	30	30	n/a	10	10	2.5	35	n/a
OP	Office	1 acre	150	150		30%	60%	50	15	30	30	50	10	10	2.5	35	n/a
OT	Office	1/2 acre	125	100		20%	60%	50	15	30	20	50	10	10	2.5	35	n/a
I	Industrial	5 acres	200	300		30%	60%	100	15[4]	150[4]	50[4]	100	50[4]	30[4]	2	35	7,500

NOTES:

[1] Density requirements for permitted institutional uses are:

Use	Density
Library	1 per lot
Hospital	10,000 square feet per bed
Disabled and seniors	8,000 square feet per unit

[2] Except church steeples which shall not exceed 100 feet.

[3] Minimum lot width shall be measured at the front yard setback line and shall not be less than that specified on this schedule. In the RLD Zone, lot frontage measured at the curbline may be reduced to 125 feet if lot fronts on a cul-de-sac; corner lots shall have frontage to 175 feet on at least one abutting street, and frontage of interior lots shall be no less than minimum lot width.

[4] See § 163-74A(8) for additional requirements if bounding a residential zone.

[5] See Schedule 1 - Part 2 to calculate permitted open space: maximum percent of lot covered by buildings and structures and maximum percent of lot impervious coverage for the single-family use in the RHD and RLD zoning districts.

[6] May be reduced to five feet when building includes a covered porch across entire length of building front, parallel to street, provided that the porch is not less than eight feet in depth from the front wall of the building.

[7] May be increased to 35 feet when slope of roof is parallel to street, roof gables are provided, and gable ends of roof are perpendicular to street.

[8] The maximum number of residential dwellings shall be not more than one dwelling unit per lot in the B-1A Zone, provided the dwelling shall be limited to the second floor when a nonresidential use is included on the same lot. Affordable housing may be permitted at a density of not more than six affordable dwelling units per acre, which may be combined with a nonresidential use on the same lot. An even mix of low- and moderate-income affordable housing shall be provided, except where an odd number of dwelling units is proposed in which case the additional dwelling unit shall be a low-income unit.

[9] New building construction in the B-1 and B-1A Zones shall comply with the floor area limit requirements set forth in the attached schedule entitled "Sliding Scale Floor Area Limit." See Schedule 1 - Part 3.