



# Borough of Chatham

54 Fairmount Avenue • Chatham • NJ 07928  
973-701-6824 • ChathamBorough.org

Block: \_\_\_\_\_ Lot: \_\_\_\_\_ Zone: \_\_\_\_\_

Date: \_\_\_\_\_

1. Name of Applicant or Authorized Agent: \_\_\_\_\_  
Please Print

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

2. Applicant's Address: \_\_\_\_\_

3. Name of Lot Owner: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

4. Lot Owner's Address: \_\_\_\_\_

5. Address of Premises: \_\_\_\_\_

6. What type of work is being done? Any application for the residential permits below **requires a survey no older than 10 years.**

**Residential Properties** *Please note each item below requires a separate check made payable to Borough of Chatham*

- **\$50.00**      \_\_\_\_\_      \_\_\_\_\_      \_\_\_\_\_  
                  Received                              Cash                              Check #  
     ○ Deck   ○ Fence   ○ Shed   ○ Pool/Hot Tub   ○ AC Unit/Generator   ○ Other: \_\_\_\_\_
  
- **\$150.00**      \_\_\_\_\_      \_\_\_\_\_      \_\_\_\_\_  
                  Received                              Cash                              Check #  
     ○ Addition   ○ Detached Garage   ○ Other: \_\_\_\_\_
  
- **\$300.00**      \_\_\_\_\_      \_\_\_\_\_      \_\_\_\_\_  
                  Received                              Cash                              Check #  
     ○ New Dwelling

I (we) hereby declare and represent to the Borough of Chatham that the statements made by me (us) in this application are true and are made for the purpose of inducing the Zoning Official to issue a Zoning Permit.

Signature of Applicant: \_\_\_\_\_

Date: \_\_\_\_\_

Approved / Denied: \_\_\_\_\_

Date: \_\_\_\_\_

Zoning Officer