



Borough of Chatham
MUNICIPAL BUILDING
54 FAIRMOUNT AVENUE
CHATHAM, NEW JERSEY 07928
973-635-0674 FAX: 973-635-2417

Date of Application: _____		Block: _____		Lot: _____		Zone: _____	
Name of Applicant or Authorized Agent: _____				_____			
Phone: _____		Fax: _____		E-Mail Address: _____			
Applicant's Address: _____				_____			
Name of Lot Owner: _____				_____			
Phone: _____		Fax: _____		E-Mail Address: _____			
Lot Owner's Address: _____				_____			
Address of Premises: _____				_____			
What type of Zoning Permit is being sought? Application for the permits below requires a survey no older than 10 years. A "Certificate in Lieu of Oath" must be returned with each Application except when the survey is less than three months old.							
<input type="checkbox"/> Residential		\$50.00		_____		_____	
				Received		Cash	
						Check#	
<input type="checkbox"/> Fence		<input type="checkbox"/> Shed		<input type="checkbox"/> Property Zoning Analysis		<input type="checkbox"/> POD	
* Dumpster Requires Separate Permit							
<input type="checkbox"/> Change of Tenancy/Change in Use				\$50.00		_____	
				Received		Cash	
						Check#	
<input type="checkbox"/> Letter of Compliance							
<input type="checkbox"/> Permanent Sign Permit		\$100.00		_____		_____	
<input type="checkbox"/> Temporary Sign Permit		\$50.00		Received		Cash	
						Check#	
<input type="checkbox"/> Temporary		<input type="checkbox"/> Permanent		<input type="checkbox"/> Sandwich Board			
For change in Tenancy/Change in Use – What are the premises presently being used for?: _____							
What is the proposed use: _____				_____			
Existing Days/our of Operation: _____				Proposed Days/Hours of Operation: _____			
Number of Proposed Employees: _____				Existing Parking Spaces On-site: _____			
Gross Floor Area to be Occupied: _____		Solid Waste Facilities available On-site		Y / N		Describe: _____	

Will there be any Storage of handling of Chemicals or Hazardous Substances?				Y / N		Describe: _____	

<i>I (we) hereby declare and represent to the Borough of Chatham that the statements contained within this application are sufficient, true and of detail required for the Zoning Code Official to issue a Zoning Permit</i>							
Signature of Applicant or Authorized Agent				Date		_____	
<i>Office Use Only Below</i>				_____			
Approved By				Title		Date	
_____				_____		_____	