



BOROUGH OF CHESILHURST PLANNING AND ZONING BOARD

201 GRANT AVENUE • CHESILHURST, NJ 08089

Monday - Thursday • Hours: 9:00 a.m. - 2:00 p.m.

Edward Williams, Zoning Officer

Phone: (856) 767-4153 • zoning@chesilhurstboro.org

ZONING PERMIT APPLICATION

Applications must be submitted with:

1. \$25.00 fee for a Zoning Permit – cash, check or debit (if in person).
2. One copy of a survey showing the layout of your property with improvements. The proposed work and setbacks must be shown on this survey. If applicable, need Homeowner's Association Approval letter.

A Zoning Permit is required as a condition precedent to the commencement of a use or the erection, construction, reconstruction, alternation, conversion or installation of a structure or building and which acknowledges that such use, structure or building complies with the provisions of this chapter or a variance therefore duly authorized by the Planning Board or Zoning Board of Adjustment pursuant to N.J.S.A. 40:55D-1 et seq. Zoning permits shall be valid for one year from the date of issue. Proposed fencing within any utility easement must first receive approval from utilities department and a utility easement agreement must be submitted with the Zoning Permit Application.

COAH FEE: REQUIRED **EXEMPT** (Zones RM, RH, PR3 & PR4)

Date _____ Block _____ Lot _____ Zone _____

Applicant/Owner _____

Address of Applicant _____

Phone # _____ Email: _____

Address for which permit is to be issued _____

Description of Proposed Work and Use: _____

Signature of Applicant _____ Date _____

If your permit is put on hold for any reason, the office will only hold a permit for 30 days. After the 30 days you will be notified that the application will be disposed of.

For Department Use Only Receipt# _____

This application has been examined and found to be **IN COMPLIANCE** with the zoning requirements:

Zoning Officer: _____ Date: _____

This application is disapproved because of **NON COMPLIANCE** with zoning requirements:

Zoning Officer: _____ Date: _____

TO BE COMPLETED BY TAX COLLECTOR:

_____ All taxes due have been paid _____ Sent to Construction

_____ All assessments due have been paid _____ Returned to Applicant

_____ The following are delinquent and past due _____ Construction Permit Required

TAX COLLECTOR SIGNATURE: _____

Date: _____