



The Town of
Hackettstown
New Jersey

THE TOWN OF HACKETTSTOWN

Zoning Department

Phone: (908) 852-3702

Fax: (908) 852-2538

Email: zoning@hackettstown.net

Hours: Tuesday & Thursday: 9 a.m.-3:00 p.m.

COMMERCIAL - NEW BUSINESS OR CHANGE OF USE FORM

ZONING APPLICATION FEE: \$75.00

Note: Zoning Permit Form must accompany this form.

Block: _____ Site Address: _____ Date: _____

Lot: _____ Zone District: _____ Lot Size: _____

Applicant: _____ Phone (Home): _____

Email: _____ Phone (Office): _____

Phone (Cell): _____ Fax Number: _____

On Behalf of: _____

Name of Previous Owner/Tenant: _____

Description of **previous** use: _____

Description of **proposed** new use: _____

Approximate square footage of building or space for new use: _____

Has a variance been granted on the lot: ☐ Yes ☐ No If so, when _____

Is a sign permit required for the new use? ☐ Yes (obtain permit) ☐ No

Applications for new business or change of use must be accompanied by floor plan sketch, business name and cover letter describing operations.

I hereby certify that the above information is true to the best of my knowledge

Applicant Signature

Date Paid

Check #: _____

Based on the information, this application is:

☐ Denied ☐ *Conditionally Approved ☐ Approved Permit No. _____

*Conditional Approval based on concurrent findings of the Construction Official.

Zoning Officer

Date Deemed Complete