BOROUGH OF CHESTER
BOARD OF HEALTH
50 NORTH ROAD
CHESTER, NJ 07930
TELEPHONE # (908) 879-3660 X 2126
FAX (908) 879-0122

Application for Septic REPAIR

This application must be completed and filed with the Board of Health; the fee of $100.00 must be received prior to beginning the repair of the septic. You must answer/provide all the information requested below.

Type of Building: Residential _____ Commercial _____

(Include a sketch on the back and written description of septic repair)

Does this property have a sewerage ejector pump present: Yes_____ No_____

If Yes: A septic engineer may need to be contacted to proceed with the repair to comply with NJAC 7:9A.

Is there a garbage disposal present: Yes_____ No_____

Have all the sewer lines been located and inspected: Yes_____ No_____

Date_____ Block: _____ Lot: _____

Job Site Address: _____

Owner: _____

Mailing Address: _____

Phone/Email: _____

Contractor: _____

Address: _____

Phone/Email: _____

Applicant Name: _____

Applicant Signature_____

Applicant Mailing Address: _____

Phone/Email: _____

(please indicate if you would like to be notified by phone or email when the permit is ready otherwise the permit will be mailed)

Phone/Email_____