

EAST WINDSOR TOWNSHIP

INSTRUCTIONS FOR SIGN PERMIT APPLICATIONS

1. Fill out the attached sign permit application. The permit application must be completely filled out.
2. Return all completed forms to the East Windsor Township Construction Department with the following information:
 - A picture, an accurate colored rendering or sketch of the proposed sign. Indicate all dimensions & colors.
 - For a freestanding sign, please include a plot plan. The plot plan shall show the involved property including buildings, accessory structures, driveways, parking lots, etc. The proposed sign shall indicated / shown on the plan.
 - For a façade sign, a drawing shall be provided showing the building façade and the proposed sign. The sign must be indicated / shown exactly as it will appear on the building façade.
 - Signs requiring construction permits shall have plans that are compliant with IBC for NJ, signed and sealed by a NJ-Licensed architect or engineer. As per N.J.A.C. 5:23-2.15 (f)1.vii, such plans are to have engineering details and specifications consisting of structural details, adhesion, fastening, including calculations and technical data to be filed.

For any questions, please contact the Zoning Official @ 609-443-4000 Ext 203.

APPLICATION FOR A SIGN PERMIT

DATE:
PHONE NUMBER:
STREET ADDRESS:

BLOCK: LOT:
ZONING DISTRICT:

OWNER OF RECORD: _____
NAME: _____
ADDRESS: _____

PHONE: _____
EMAIL: _____

APPLICANT OF RECORD: _____
NAME: _____
ADDRESS: _____
PHONE: _____
EMAIL: _____

TYPE OF SIGN:

FREESTANDING FAÇADE CANOPY

MARQUEE CHANGEABLE COPY BANNER

DIRECTIONAL OTHER

ILLUMINATION: YES NO

ILLUMINATION TYPE:

EXPOSED L.E.D. / COLORED LIGHTING YES NO

Sign Dimension: _____

Square Ft. Area of Sign: _____

Square Ft of Façade Frontage: _____

Percentage of Sign Area / Façade Area: _____

Lot Frontage (feet): _____

Number of Stories: _____

Bldg Height: _____

Estimated Cost of Signage: _____

I hereby certify that the proposed signage work is authorized by the Owner of Record and that I have been authorized by the Owner to make this application as the authorized Agent and agree to conform to all applicable laws and ordinances of this jurisdiction.

(Signature of Applicant)

(Date)

(Signature of Owner)

(Date)

Planning Board Approval Required: Yes ___ No ___

Zoning Board Approval Required: Yes ___ No ___

Other: _____

Approved: ___

(Date)

Not Approved: ___

(Date)

Zoning Officer: _____