



**Zoning Sign Permit–Facade Permit # \_\_\_\_\_**

**DEPARTMENT OF PLANNING & ENGINEERING**

P.O. Box 1081, East Brunswick, NJ 08816

(732) 390-6870

Name of Business \_\_\_\_\_ Phone # \_\_\_\_\_

Address of Subject Property \_\_\_\_\_ Block \_\_\_\_\_ Lot \_\_\_\_\_ Zone \_\_\_\_\_

Owner of Property \_\_\_\_\_ Phone # \_\_\_\_\_

Address of Owner \_\_\_\_\_

Sign Erector \_\_\_\_\_ Address \_\_\_\_\_ Phone # \_\_\_\_\_

Drawing Provided: \_\_\_\_\_ Yes \_\_\_\_\_ No \_\_\_\_\_ Attached

Previous Sign \_\_\_\_\_

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**WALL SIGN (Facade)**

Height of Facade \_\_\_\_\_ Width of Facade \_\_\_\_\_ Facade Total Sq. Ft. \_\_\_\_\_

Facade Orientation (North, South, East, West) \_\_\_\_\_

Size of Sign: Height \_\_\_\_\_ Width \_\_\_\_\_ Total Square Feet \_\_\_\_\_

Are there any other wall signs on this facade? \_\_\_\_\_ If so, indicate number & sizes (sq/ ft. & dimensions) on proposed plans

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**ILLUMINATION AND COLOR**

Sign will be (internal), (external), (illuminated)\*or (non-illuminated). (Please underline.)

\*If illuminated, electrical permit required.

Colors of Lettering \_\_\_\_\_ and Background \_\_\_\_\_

Words displayed on Sign \_\_\_\_\_

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The undersigned agrees to conform to all applicable laws of this jurisdiction:

\_\_\_\_\_  
Property Owner Name (Print or Type)

\_\_\_\_\_  
Name of Applicant (Print or Type)

\_\_\_\_\_  
Signature                      Date

\_\_\_\_\_  
Signature                      Date

To be paid \_\_\_\_\_

New Sign \_\_\_\_\_ \$25.00 Fee\*\* \_\_\_\_\_ Date Paid \_\_\_\_\_

Replacement \_\_\_\_\_

Approved \_\_\_\_\_

\_\_\_\_\_  
Zoning Officer

Denied \_\_\_\_\_

Comments: \_\_\_\_\_

\*\*No fee charged when Construction Permit is not required for replacement

cc: Applicant  
Construction Inspection