

ZONING PERMIT APPLICATION
TOWNSHIP OF PEMBERTON

Zoning Department

500 Pemberton-Browns Mills Road
Pemberton, New Jersey 08068-1539
609-894-3306 Fax: 609-894-7976

FOR OFFICE USE ONLY

Permit/Receipt # _____

Date Received: _____

Received by: _____

Response Due: _____

Review Date: _____

Approved/Denied: _____

Sign Permit Application (Article V; Chapter 190-44)

Plans and detailed information shall be submitted with each application for a sign permit, setting forth the dimensions of the sign, the materials incorporated into its construction, the methods and materials used to support the sign, the type of illumination, if any, and its exact location on the building or premises. A sketch of the proposed sign, drawn to a scale of not less than 1/2 inch to one foot, shall be provided. All temporary signs shall be removed within 14 days after the special event or temporary activity has taken place. Temporary signs may not be used more than 60 days in one year.

BLOCK: _____ LOT: _____

CONTENT OF SIGN: _____

SIZE AND TYPE OF SIGN: _____

DATE(S) OF ACTIVITY (if applicable): _____

LOCATION OF SIGN(S): ***Consent required**

(If additional space is required please attach a separate sheet listing all locations.)

APPLICANT
NAME: _____

ADDRESS: _____

CITY, STATE ZIP: _____

PHONE: _____

OWNER/ORGANIZATION
NAME: _____

ADDRESS: _____

CITY, STATE, ZIP: _____

EMAIL: _____

APPLICANT/OWNER SIGNATURE _____

Applicant/Owner is responsible for accuracy of documentation and information submitted.

***The application shall be accompanied by written consent of the owner or lessor of the property.**