

TOWNSHIP OF WALL
ZONING PERMIT APPLICATION FOR
SIGNS

1. Owner's Name: _____
Address & Zip Code: _____
Phone Number: _____

2. Applicant's Name: _____
Address & Zip Code: _____
Phone Number: _____

3. Street Address of Property: _____
Block: _____ Lot: _____ Zone: _____

4. Existing Use of Property: _____
Proposed Use of Property: _____

5. Type of signage proposed (detailed description): _____

a) Area of property where sign(s) are to be located including distances from property lines: _____

b) Dimensions of sign: Square footage: _____ s.f.,
Length: _____ ft., Width: _____ ft.,
Overall height from top of grade: _____ ft.,
Underclearance: _____ ft.,
Projection from facade (if wall sign): _____

c) Type of lighting: _____

6. MUST SUBMIT TWO (2) COPIES OF SIGN DETAIL SHOWING SIGN DIMENSIONS, TWO (2) COPIES OF PLOT PLAN SHOWING ALL EXISTING AND PROPOSED SIGN LOCATIONS WITH SETBACK DIMENSIONS AND APPLICATION FEE OF \$40.00. Checks to be made payable to Township of Wall.

7. Applicant certifies that all statements and information made and provided as part of this application are true to the best of his knowledge, information and belief. Applicant further states that all pertinent municipal ordinances, and all conditions, regulations and requirements of site plan approvals, variances, and other permits granted with respect to said property shall be complied with.

Signature of Applicant: _____ Date: _____