

SIGN AND FACADE PROCEDURES

IN ORDER TO RECEIVE A PERMIT, THE FOLLOWING INFORMATION MUST BE INCLUDED IN YOUR APPLICATION FOLDER

- APPLICATION MUST BE COMPLETELY FILLED OUT PRIOR TO SUBMISSION
- A PHOTO OF THE INTENDED BUILDING AND PHOTOS OF THE PROPERTIES TO THE LEFT AND RIGHT OF THE BUILDING.
- A HOLD HARMLESS AGREEMENT SIGNED BY YOUR LANDLORD OR APPROVED AGENT IF YOU ARE INSTALLING OR CHANGING AN AWNING OR PROJECTING SIGN.
- FABRIC SWATCHES FOR AWNING – A COLOR RENDERING IS NOT SUFFICIENT.
- **ORIGINAL, (NOT FAX) FLAME RESISTANT CERTIFICATE COMPLETED BY THE FABRIC COMPANY.**
- **THREE DRAWINGS CLEARLY SHOWING SIZE OF AWNING OR SIGN, AS WELL AS LETTERS, LOGOS, AND GRAPHICS ON THE DRAWING.**
- APPROVAL FORM MUST BE SIGNED BY OWNER OF BUILDING AND FORM MUST BE COMPLETED
- IF YOU ARE NOT A REGISTERED CONTRACTOR WITH THE CITY OF ENGLEWOOD, THEN THE APPLICATION FOR CONTRACTORS REGISTRATION MUST BE COMPLETED
- ANY QUESTIONS PLEASE CALL (201) 871-6645

PLEASE DO NOT START ANY WORK UNTIL PERMIT IS IN HAND

CITY OF ENGLEWOOD – TO BE USED FOR SIGN APPLICATION ONLY

NAME OF APPLICANT: _____

APPLICANT EMAIL: _____ APPLICANT PHONE# _____

INSTALLATION ADDRESS: _____

SIGN VENDOR: _____

VENDOR ADDRESS: _____

PERMIT NUMBER _____

PERMIT FEE _____

DATE ISSUED _____

Provide accurate diagram of sign, showing location on the building or premises, together with structural supports. State dimensions of sign and exact advertising to be used thereon. Include letter height, type face, artwork and materials used in sign. Provide separate diagram to scale or, if not available, provide same on reverse side of this application. If there are other signs on building attach photos.

TYPE OF SIGN Horizontal Vertical Projecting Awning Ground Other _____

PROJECTION OVER SIDEWALK _____

HEIGHT ABOVE SIDEWALK _____ WEIGHT OF SIGN _____

SIGN MATERIALS: _____ BACKGROUND: _____ LETTERS: _____

ILLUMINATED BY: NEON: _____ BULB TYPE: _____ OTHER: _____

LIGHT BOX: _____ PERCENTAGE OF OPAQUE COVERAGE: _____ --

TYPES OF SUPPORTS: ANGLE IRON: _____ PIPE: _____ CABLE: _____

OTHER: _____

NOTE: No permit can be issued for any projecting sign which extends over City property until a certificate of liability insurance has been filed with the Chief Inspector as required by the Sign Ordinance of the City of Englewood. See City Ordinance #79-34 for complete insurance requirements. No sign permit can be issued until the application is reviewed by the SIGN AND BUSINESS REVIEW BOARD. If the applicant is not owner of the building – owner's affidavit must be executed. A separate Electrical Permit is required for all illuminated signs.

List below all other signs on building, dimensions, materials, lighting and location.
Attach photo of all other signs on building.

Date _____ Signature of applicant _____

Application approved by _____ Date approved _____

STATE OF NEW JERSEY
COUNTY OF BERGEN
CITY OF ENGLEWOOD

DATE: _____

I _____ CERTIFY THAT I AM THE OWNER OF THE PROPERTY

LOCATED AT _____ IN ENGLEWOOD, NEW JERSEY.

THIS PROPERTY IS DESIGNATED AS BLOCK _____ LOT _____ ON THE ASSESSMENT
MAP OF THE CITY OF ENGLEWOOD.

I HEREBY AUTHORIZE _____ TO MAKE APPLICATION FOR A SIGN PERMIT
PURSUANT TO ORDINANCE # 79-34.

SIGNATURE OF OWNER: _____

ADDRESS OF OWNER: _____

SWORN BEFORE ME THIS _____ DAY OF _____ 20 _____

NOTARY PUBLIC

HOLD HARMLESS AGREEMENT FOR AWNING & PROJECTING SIGNS

THIS AGREEMENT made this _____ day of _____, 20 _____,

by and between _____

residing or having offices located at _____

_____ (hereinafter referred to as the "Owner") and the CITY OF ENGLEWOOD, with offices located at 2-10 North Van Brunt Street, Englewood, New Jersey (hereinafter referred to as the "City"),

WITNESSETH:

WHEREAS, the Owner is the owner of certain premises located within the City of Englewood known as designated as Lot ____ in Block ____ as shown on the Tax Map of the City of Englewood and commonly known as _____; and

WHEREAS, certain improvements constructed upon said premises encroach upon the City's right-of-way as more particularly described below:

; And

WHEREAS, The Owner has requested the consent of the City to a license to permit such encroachment,

NOW, THEREFORE, in consideration of the mutual promises and conditions hereinafter contained, the parties agree as follows:

1. The City hereby consents to a temporary license to continue the aforesaid encroachment within the City's right-of-way. Such license is revocable at any time by the City.
2. Upon the revocation of such license, the Owners shall cause the encroachment to be removed within thirty (30) days following such revocation.
3. The Owner agrees to indemnify and hold harmless the City its officers, employees and agents from any and all claims for damages and liability arising by reason of the aforesaid encroachment into the City's right-of-way, including, but not necessarily limited to, the cost of defending any such action for damages, including reasonable legal fees.

IN WITNESS WHEREOF, the parties hereto have set their hands and seals the day and year first written above.

ATTEST:

CITY OF ENGLEWOOD

_____ BY: _____

WITNESS:

_____ (Building Owner) or Agent

SWORN BEFORE ME THIS _____ DAY OF _____ 20 _____

NOTARY PUBLIC



Englewood

P.O. Box 228 • Englewood, N.J. 07631

APPLICATION FOR CONTRACTORS REGISTRATION

If registration is for a company, partnership or corporation, the notarized signature at the bottom of this form must be that of the principal officer thereof.

File # _____
Date Filed _____
Annual Fee \$ 50.00

APPLICATION MUST BE RETURNED THE CERTIFICATE OF LIABILITY NAMING THE CITY OF ENGLEWOOD AS THE CERTIFICATE HOLDER.

NAME OF CONTRACTOR OR FIRM _____
OFFICE ADDRESS _____

BUSINESS PHONE () _____ FAX () _____

NAME & ADDRESS OF PRINCIPAL OFFICER, IF APPLICANT IS A COMPANY, PARTNERSHIP OR CORPORATION _____
FEDERAL EMPLOYEE No. _____

CLASSIFICATION UNDER WHICH REGISTRATION IS REQUESTED PLEASE CHECK ONE

- GENERAL CONTRACTOR FOR LARGE BUILDING PROJECTS
- CONTACTOR FOR SMALL BUILDINGS & ALTERATIONS
- ROOFING & SIDING CONTRACTOR
- DEMOLITION CONTRACTOR
- SWIMMING POOL CONTRACTOR
- SIGN & BILLBOARD CONTRACTOR
- MISCELLANEOUS CONTRACTOR

NUMBER OF YRS FIRM HAS BEEN LOCATED AT ABOVE ADDRESS (IF FIRM HAS BEEN AT ABOVE ADDRESS FOR LESS THAN 2 YRS, GIVE PREVIOUS ADDRESS) _____

DOES FIRM CARRY PUBLIC LIABILITY INSURANCE _____

IF SO, STATE AMOUNT OF COVERAGE _____

NAME OF COMPANY WRITING YOUR LIABILITY INSURANCE _____

DOES FIRM HAVE A LICENSEND ENGINEER/ARCHITECT ON STAFF _____

IF SO, STATE NAME & LICENSE NUMBER OF ENGINEER/ARCHITECT _____

SWORN TO ME THIS _____ DAY OF _____ 20 _____

NOTARY _____ APPLICANT _____