

## **SIGN AND FACADE PROCEDURES**

THE CITY OF ENGLEWOOD "SIGN REGULATIONS" ORDINANCE #17-05 DOCUMENT IS AVAILABLE AT THE BUILDING DEPARTMENT AND COULD ALSO BE LOCATED AT THE FOLLOWING LINK:

<https://ecode360.com/documents/EN2705/public/455788482.pdf>

### **IN ORDER TO RECEIVE A PERMIT, THE FOLLOWING INFORMATION MUST BE INCLUDED IN YOUR APPLICATION PACKET**

1. AN APPLICATION FOR ZONING PERMIT, fully completed and signed
2. A CONSTRUCTION PERMIT JACKET **AND A BUILDING SUBCODE TECHNICAL SECTION FORM**. Both must be fully completed (the items are located on the second floor of the municipal building at the Building Department, or you may complete UCC Forms # F100 and F110 which can be found using web address  
<https://www.nj.gov/dca/codes/resources/constructionpermitforms.shtml>
3. AN ELECTRICAL SUBCODE TECHNICAL SECTION FORM, IF YOUR PROPOSED SIGN/AWNING HAS **ANY ELECTRICAL ELEMENTS** (the form is located on the second floor of the municipal building at the Building Department, or you may complete UCC Form # F120 which can be found using web address  
<https://www.nj.gov/dca/codes/resources/constructionpermitforms.shtml>
4. A PHOTO OF THE INTENDED BUILDING **AND** PHOTOS OF THE PROPERTIES TO THE LEFT AND RIGHT OF THE BUILDING
5. **THREE COPIES OF DRAWINGS** CLEARLY SHOWING GRAPHICS, **SIZE OF AWNING OR SIGN, SIZE OF LETTERS AND LOGOS.**

THE DRAWINGS MUST INCLUDE THE FOLLOWING INFORMATION:

* Type of Sign	* Sign Background	* Type of Supports	* Sign Materials	* Type of Letters
* Weight of Sign	* Projection over Sidewalk	* Height above Sidewalk		
*Name of Contractor preparing the plans * Date of plans * Project Address				

IF THE SIGN IS ILLUMINATED, INCLUDE INFORMATION SUCH AS:

* Method of Illumination	* Percentage of Opaque	* Type of Light Box
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6. APPROVAL FORM COMPLETED AND SIGNED BY PROPERTY OWNER
7. A HOLD HARMLESS AGREEMENT SIGNED BY YOUR LANDLORD OR APPROVED AGENT **ONLY IF YOU ARE INSTALLING OR CHANGING AN AWNING OR PROJECTING SIGN**  
(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.)
8. FABRIC SWATCHES **FOR AWNING ONLY**, A COLOR RENDERING IS NOT SUFFICIENT. **INCLUDE AN ORIGINAL, FLAME RESISTANT CERTIFICATE COMPLETED BY THE FABRIC COMPANY**
9. IF YOU ARE NOT A REGISTERED CONTRACTOR WITH THE CITY OF ENGLEWOOD, THEN THE APPLICATION FOR CONTRACTORS REGISTRATION MUST BE COMPLETED

**YOU MUST NOT START ANY WORK UNTIL PERMIT IS IN HAND**

ANY QUESTIONS, PLEASE CALL (201) 871-6645



## ZONING PERMIT APPLICATION for SIGN(s)

Application # \_\_\_\_\_

Block \_\_\_\_\_ Lot \_\_\_\_\_  RESIDENTIAL  COMMERCIAL

Work Site Location Address \_\_\_\_\_

**Property Owner Name** \_\_\_\_\_

Telephone \_\_\_\_\_ Email \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

**Contractor** \_\_\_\_\_

Telephone \_\_\_\_\_ Email \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

**Complete following section, if commercial use:**

OWNER OCCUPIED  TENANT OCCUPIED

Is there change in tenancy or ownership?  YES  NO

BUSINESS NAME \_\_\_\_\_

Business Owner Name \_\_\_\_\_

Telephone \_\_\_\_\_ Email \_\_\_\_\_

Current use / nature of business \_\_\_\_\_

If new tenant/owner, proposed use / nature of business \_\_\_\_\_

Days and Hours of Operation: \_\_\_\_\_

DATE RECEIVED:

### CERTIFICATION IN LIEU OF OATH

I hereby certify that I am the (agent of) owner of record and am authorized to make this application and perform the work listed on this application

Sign Here: \_\_\_\_\_

Print Name Here: \_\_\_\_\_

### TECHNICAL SITE DATA

#### DESCRIPTION OF WORK:

#### APPLICATION FEE \$50

**Non-refundable fee is to be paid at the time of application submittal**

APPROVED  DENIED

SIGNATURE OF ZONING OFFICIAL

DATE

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.

ADDRESS OF OWNER: \_\_\_\_\_  
\_\_\_\_\_

SIGNATURE OF OWNER: \_\_\_\_\_

NAME AND TITLE OF SIGNATORY, if owner is a corporation/LLC/partnership: \_\_\_\_\_  
\_\_\_\_\_

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

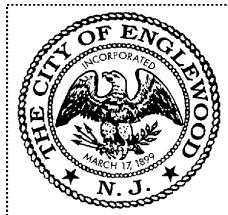
\_\_\_\_\_ BY: \_\_\_\_\_

WITNESS:

\_\_\_\_\_  
Building Owner

SWORN BEFORE ME THIS \_\_\_\_\_ DAY OF \_\_\_\_\_ 20\_\_\_\_\_

\_\_\_\_\_  
NOTARY PUBLIC



# Englewood

2-10 N. Van Brunt Street • Englewood, N.J. 07631 • (201) 871-6642 • Fax (201) 816-8018

## APPLICATION FOR CONTRACTOR'S 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. Annual Fee \$50 payable to City of Englewood.

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

NAME OF CONTRACTOR OR FIRM: \_\_\_\_\_

OFFICE ADDRESS: \_\_\_\_\_

Business Phone (\_\_\_\_) \_\_\_\_\_ EMAIL: \_\_\_\_\_

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
- CONTRACTOR FOR SMALL BUILDINGS & ALTERATIONS
- ROOFING & SIDING CONTRACTOR
- DEMOLITION CONTRACTOR
- SWIMMING POOL CONTRACTOR
- SIGN & BILLBOARD CONTRACTOR
- MISCELLANEOUS CONTRACTOR

NUMBER OF YEARS FIRM HAS BEEN LOCATED AT ABOVE ADDRESS. (IF FIRM HAS BEEN AT ABOVE ADDRESS FOR LESS THAN TWO YEARS, 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 LICENSED ENGINEERING/ARCHITECT ON STAFF: \_\_\_\_\_

IF SO, STATE NAME & LICENSE NUMBER OF ENGINEER/ARCHITECT: \_\_\_\_\_

SWORN TO ME THIS \_\_\_\_\_ DAY OF \_\_\_\_\_ 20\_\_\_\_\_

NOTARY \_\_\_\_\_ APPLICANT \_\_\_\_\_