



ZONING PERMIT APPLICATION

ATTACHMENT B

NON-RESIDENTIAL

HILLSBOROUGH TOWNSHIP
Planning & Zoning Department
Hillsborough Municipal Complex
The Peter J. Biondi Building
379 South Branch Road
Hillsborough, NJ 08844
www.hillsborough-nj.org
(908) 369-8382

The sections below are project specific; most projects will require that you only complete one of the sections. Please read the project descriptions below to determine which section(s) applies to your project.

Is your business moving into a newly constructed or existing non-residential retail office space?

Complete Section 1: Change Use/Tenant -Existing Building & New Use/Tenant - New Structure

Are you installing a new sign, or changing location, sign face, or message of existing sign?

Complete Section 2: Permanent Signs

Are you requesting a temporary sign to advertise a business or event?

Complete Section 3: Temporary Signs

Is your project not listed on this attachment?

Contact the Planning & Zoning Department

Section 1: Change Use/Tenant – Existing Building & New Use/Tenant – New Structure

1. Business Name: _____

2. Doing Business As (If different from business name): _____

3. Principal Use for which permit is requested: _____

*This is the primary use the business will conduct. An **accessory use** is a use that is subordinate, incidental to or customarily found in connection with the principal use and **does not need to be listed**. For example, in most warehouses, an office is present for paperwork and phone calls, but the **principal use** is warehousing, shipping, and receiving.*

4. Specific nature of business to be conducted (description): _____

If more space is needed, please provide an attachment

5. Existing tenant moving locations in the same development?

No Yes

6. State and/or Local License associated with use?

No Yes, indicate type and license#: _____

7. Is this the same business with a different owner and/or business name?

No Yes, new owner Yes, indicate old name: _____

8. Outdoor storage proposed? No Yes, explain: _____

Storing toxic or highly flammable chemicals or gases?

No Yes, explain: _____

Storing gasoline, fuel oils, gases, chemicals or other flammable, corrosive or toxic substances?

No Yes, indicate quantities in total liquid gallons or equivalent: _____

(Max ≤: 30,000 liq. Gal.)

Section 2: Permanent Signs

1. Does your location have a sign manual/plan? No Yes, answer the following:
Name of Development/Project: _____
2. Sign Type:
 Wall mounted
Choose one: New or Alteration of Sign Face
 Freestanding
Choose one: New or Alteration of Sign Face
3. Total size of sign: _____ square feet
Height of sign: _____ feet
4. Will your sign be illuminated? No Yes, check all that apply:
 Internal (Dark background & light lettering required) or External
5. Please provide **two (2) color images** along with the specs of the proposed sign(s) with your application.

Section 3: Temporary Signs

1. Sign type:
 Business Advertising (Max: 4SF)
 Event (Max: 12SF)
 Political Campaign (Max: 12SF)
 Grand Opening Banner (Max: 24 SF)
Choose one: Attached to Ground or Attached to Establishment
Will there be a search light display? Yes No
2. Total size of sign: _____ square feet
Height of sign : _____ feet
3. Dates on which sign(s) will be displayed: _____ to _____
Advertising signs & Grand Opening banners may be displayed for a maximum of 30 days. Event signs may be displayed a maximum of 15 days before the event. Campaign signs may be erected no earlier than 30 days before the election.
4. Complete for **Business Advertising** or **Event Sign** Only
Number of street frontages _____ (Example: Corner lots have 2 street frontages)
Note: Not more than one sign shall be located on each street frontage.
5. Please provide **one (1) picture or mock-up** of the proposed sign(s) with your application. This *can* be hand drawn and must include dimensions and message that will be displayed.