

**HILLSBOROUGH TOWNSHIP
SIGN REVIEW COMMITTEE
SIGN WAIVER GUIDELINES AND APPLICATION**

APPLICATION NAME _____

SITE LOCATION _____

BLOCK _____ LOT(S) _____

APPLICATION GUIDELINES

Please submit one of the following items, unless otherwise noted. The Sign Review Committee must hear and decide this request within sixty (60) calendar days of submission of a complete application.

_____ COMPLETED APPLICATION FORM (Original only)

_____ NARRATIVE EXPLAINING PROPOSED WAIVER REQUEST (Original only)

_____ TAX INQUIRY CERTIFICATE STATING TAXES ON SUBJECT PROPERTY HAVE BEEN PAID
(Obtain through the Tax Collector's office) (Original only)

_____ REQUIRED APPLICATION FEE (\$50 fee for initial / \$25 for each additional sign requested - payable to Hillsborough Township).

_____ NINE (9) COPIES OF THE PROPOSED SIGN PLAN, INCLUDING THE LOCATION OF THE PROPOSED SIGN(S) ON THE PROPERTY SURVEY (must indicate all driveways, building footprints, easements as applicable, as well as other sign details including lighting, required landscaping, dimensions, and related items).

SIGN WAIVER APPLICATION

APPLICANT'S NAME _____

APPLICANT'S ADDRESS _____

APPLICANT'S PHONE _____ EMAIL _____

BUSINESS OWNER (if other than Applicant) _____

Phone _____ Email _____

Corporation ____ Partnership ____ Individual ____ Other (Specify) _____

OWNER OF PREMISES _____

OWNER'S ADDRESS _____

OWNER'S PHONE _____ EMAIL _____

Statement of Landowner:

***I, _____, the owner of Block _____,
Lot(s) _____ in the Township of Hillsborough, Somerset County, New Jersey, hereby
acknowledge and give my consent to this application.***

Landowner's Signature

Print Signer's Name

Date

OFFICE USE ONLY: Application # _____ Date Determined Complete _____
Fees \$ _____ Check# _____ Receipt # _____ Permit# _____