



# ZONING PERMIT APPLICATION

## Non-Residential Change of Use & Signs

VERONA TOWNSHIP  
Engineering & Zoning Department  
10 Commerce Court  
Verona, NJ 07044  
Michael DeCarlo  
Engineering Manager  
Zoning Official  
(973) 239-8146

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

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

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

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

Complete Section 2: Permanent Signs

Complete Section 3: Temporary Signs

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

1. Existing Business Name: \_\_\_\_\_

2. Existing Business Use: \_\_\_\_\_

3. New Business Name: \_\_\_\_\_

4. Doing Business As (If different from business name): \_\_\_\_\_

5. New Principal Use for which permit is requested: \_\_\_\_\_

***This is the primary use the business will conduct.** Accessory uses (uses that are subordinate, incidental to or customarily found in connection with the principal use) should not be listed. For example, the **principal use** may be warehousing, shipping, and receiving while the accessory use is an office.*

6. Specific nature of the new business to be conducted (description): \_\_\_\_\_  
\_\_\_\_\_

*If more space is needed, please provide an attachment*

7. Existing tenant moving locations in the same building?

No  Yes

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

No  Yes, indicate type and license#: \_\_\_\_\_

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

No  Yes, new owner  Yes, indicate old name: \_\_\_\_\_

10. Does the Business require parking?  No  Yes, how many? \_\_\_\_\_

11. 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: \_\_\_\_\_

## 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
1. Total Length and Width and Height of Sign: \_\_\_\_\_ Length \_\_\_\_\_ Width  
Height of sign: \_\_\_\_\_ Feet.  
Total linear feet of store or building frontage where sign will be \_\_\_\_\_ Feet.
3. Will your sign be illuminated?  No  Yes, check all that apply:  
 Internal (Dark background & light lettering required) or  External
4. Please provide **two (2) color images** along with the specs of the proposed sign(s) with your application.

## Section 3: Temporary Signs

2. Sign type:  
 Business Advertising: Total size of sign: \_\_\_\_\_ square feet  
 Event: Total size of sign: \_\_\_\_\_ square feet  
 Political Campaign: Total size of sign: \_\_\_\_\_ square feet  
 Grand Opening Banner: Total size of sign: \_\_\_\_\_ square feet  
*Choose one:*  Attached to Ground or  Attached to Establishment
3. Total Length and Width and Height of Sign: \_\_\_\_\_ Length \_\_\_\_\_ Width  
Height of sign: \_\_\_\_\_ feet.  
Total linear feet of store or building frontage where sign will be \_\_\_\_\_ Feet.
4. Dates on which sign(s) will be displayed (If Temporary) from \_\_\_\_\_ to \_\_\_\_\_
5. Complete for **Business Advertising** or **Event Sign** Only  
Number of street frontages \_\_\_\_\_ (Example: Corner lots have 2 street frontages)
6. Please provide **one 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.
6. Please provide **a site plan or aerial map** that indicates where the sign will be placed on the property.