

**PLANNING BOARD  
TOWNSHIP OF WEST CALDWELL  
ESSEX COUNTY, NEW JERSEY**

**SIGN APPLICATION**

PBS-\_\_\_\_-\_\_\_\_\_

Sign text: \_\_\_\_\_

Site location: Name \_\_\_\_\_ Zone District \_\_\_\_\_  
Address \_\_\_\_\_ Block \_\_\_\_\_ Lot \_\_\_\_\_

NOTE: For wall-mounted signs, all information in boxes ① and ② below must be completed.  
For free-standing signs, all information in boxes ① and ③ below must be completed.  
Incomplete Applications cannot be processed and will be returned to the Applicant.

① Sign Dimensions	② Wall-Mounted Signs Only	③ Free-Standing Signs Only
Horizontal (max) _____	Wall Width _____	Distance from Property Line:
Vertical (max) _____	Wall Height (ground to roof) _____	to Sign _____ to Building _____
Sign Area (H x V) _____	Wall Area _____	Lot Frontage (width) _____
Sign Depth _____	Sign Area % Wall Area _____ %	Building Frontage (width) _____
Permanent Sign _____	Distance below roof to	Distance above ground
Temporary Sign: (dates)	top of sign _____	to top of sign _____
From _____ To _____	Illuminated _____ Non-Illuminated _____	Illuminated _____ Non-Illuminated _____
		Number of sign faces _____

Attachments/Enclosures: 1. \_\_\_\_\_  
2. \_\_\_\_\_  
3. \_\_\_\_\_

Application is hereby made to the Township of West Caldwell for approval of the above referenced sign to be erected or altered pursuant to plans and specifications submitted herewith and in accordance with all provisions of applicable laws, ordinances, codes and regulations.

**Applicant:** Signature \_\_\_\_\_ Date \_\_\_\_\_  
Name (print) \_\_\_\_\_ Phone \_\_\_\_\_ Fax \_\_\_\_\_  
Company \_\_\_\_\_ Address \_\_\_\_\_

Authorization is hereby granted by the Property Owner for submission of the above referenced Sign Application.

**Property Owner:** Signature \_\_\_\_\_ Date \_\_\_\_\_  
Name (print) \_\_\_\_\_ Phone \_\_\_\_\_ Fax \_\_\_\_\_  
Company \_\_\_\_\_ Address \_\_\_\_\_