



**CITY OF VINELAND**  
640 EAST WOOD ST  
VINELAND, NJ 08360  
LICENSEANDINSPECTION@VINELANDCITY.ORG

**CITY OF VINELAND ZONING PERMIT APPLICATION FOR WALL SIGN**

FEE: \$77.00 - Check or Money Order Only

1. Work Site: \_\_\_\_\_ Block: \_\_\_\_\_ Lot: \_\_\_\_\_
2. Is this a corner lot?  Yes  No What street does it intersect: \_\_\_\_\_
3. Property Owner: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_
- Phone: (      ) \_\_\_\_\_ Email Address: \_\_\_\_\_
4. Name of Business being advertised: \_\_\_\_\_ Phone: (      ) \_\_\_\_\_  
Sign Copy (message on sign): \_\_\_\_\_
5. Sign Company: \_\_\_\_\_ Phone: (      ) \_\_\_\_\_  
Address: \_\_\_\_\_  
Email Address: \_\_\_\_\_ Fax # \_\_\_\_\_
6. List all structures/uses on lot: \_\_\_\_\_
7. Was a variance granted for sign?  Yes  No  Planning Board  Zoning Board Date: \_\_\_\_\_
8. Is this a changeable copy sign?  Yes  No How many times per day does copy change? \_\_\_\_\_ (8 times maximum)
9. List the size of ALL EXISTING wall signs (in feet and inches) on this building (include ALL tenant spaces)  
NORTH SIDE ---  None \_\_\_\_\_ x \_\_\_\_\_ Total sq. ft. \_\_\_\_\_  
SOUTH SIDE ---  None \_\_\_\_\_ x \_\_\_\_\_ Total sq. ft. \_\_\_\_\_  
EAST SIDE ---  None \_\_\_\_\_ x \_\_\_\_\_ Total sq. ft. \_\_\_\_\_  
WEST SIDE ---  None \_\_\_\_\_ x \_\_\_\_\_ Total sq. ft. \_\_\_\_\_
10. List the size of ALL PROPOSED wall signs (in feet and inches) on this building  
NORTH SIDE ---  None \_\_\_\_\_ x \_\_\_\_\_ Total sq. ft. \_\_\_\_\_  
SOUTH SIDE ---  None \_\_\_\_\_ x \_\_\_\_\_ Total sq. ft. \_\_\_\_\_  
EAST SIDE ---  None \_\_\_\_\_ x \_\_\_\_\_ Total sq. ft. \_\_\_\_\_  
WEST SIDE ---  None \_\_\_\_\_ x \_\_\_\_\_ Total sq. ft. \_\_\_\_\_

11. List the exterior dimensions of EACH elevation (in feet and inches) of the building for which signage is proposed

NORTH SIDE --- \_\_\_\_\_ ft. HIGH x \_\_\_\_\_ ft. WIDE --- Total sq. ft. \_\_\_\_\_  
SOUTH SIDE --- \_\_\_\_\_ ft. HIGH x \_\_\_\_\_ ft. WIDE --- Total sq. ft. \_\_\_\_\_  
EAST SIDE --- \_\_\_\_\_ ft. HIGH x \_\_\_\_\_ ft. WIDE --- Total sq. ft. \_\_\_\_\_  
WEST SIDE --- \_\_\_\_\_ ft. HIGH x \_\_\_\_\_ ft. WIDE --- Total sq. ft. \_\_\_\_\_

**Requirements for review: NO REVIEW WILL BE PERFORMED OF AN INCOMPLETE APPLICATION**

- (a) **BUILDING DRAWINGS** (*Three copies required*) -- Must show exact size of each side of the building on which a sign is to be attached or painted. Each side must be identified by the direction that it faces. All existing and proposed signs and the sizes of each must be shown. Include entire side of building if more than one tenant space exists on that side. The sizes reflected on drawing should match information above.
- (b) **SIGN DRAWINGS** (*Five copies required*) -- Detailed drawings required to show the size, construction and attachment of the sign to the building. Two of the five drawings may be required to be signed and sealed by NJ licensed architect/engineer, at the discretion of the Building Sub-Code Official. *Contact him first at (856) 794-4113.*
- (c) **SEALED ELECTRIC APPLICATION** -- required for all new and replacement U.L. approval required for manufactured signs

**Applicant Certification:** I hereby certify that the information provided is true and correct, knowing that this application will be processed relying on same. **I ACKNOWLEDGE THAT THE ZONING PERMIT IS NOT VALID UNTIL ALL CONDITIONS SET FORTH IN ZONING PERMIT HAVE BEEN SATISFIED.**

Applicant Name (Print)

Applicant Signature

Date

**Certification (REQUIRED if applicant is not the property owner).** I certify that I do not have any objections to this signage.

Property Owner Name (Print)

Property Owner Signature

Date

Date Rec'd \_\_\_\_\_ Time: \_\_\_\_\_ By: \_\_\_\_\_ Date Deemed  Complete \_\_\_\_\_ By: \_\_\_\_\_

Date Deemed  Incomplete \_\_\_\_\_ By: \_\_\_\_\_ (see comments) Re-submission Date: \_\_\_\_\_ Time: \_\_\_\_\_

Date Approved: \_\_\_\_\_ By: \_\_\_\_\_ Date Denied: \_\_\_\_\_ By: \_\_\_\_\_ (see comments) Zone: \_\_\_\_\_

Permit # \_\_\_\_\_ Block(s)  1  2  3  4  a  b  c  d  e  f  See reverse side for comments

FEE PAID \$ \_\_\_\_\_  CASH  CHECK # \_\_\_\_\_ DATE FEE DEPOSITED: \_\_\_\_\_ (revised 1/05/26)