CITY OF CAMDEN DIVISION OF PLANNING CITY HALL – ROOM 224 PO BOX 95120 CAMDEN, NEW JERSEY 08101-5120 (856) 757-7214

INSTRUCTIONS FOR ZONING/SIGN PERMIT APPLICATION

ALL APPLICANTS WHO NEED A ZONING/SIGN PERMIT MUST SUBMIT THE FOLLOWING:

- 1. Completed Zoning AND/OR Sign Application
- 2. Proof of ownership (deed, tax bill, or lease) (Leases must be notarized) (Contract of Sale)
- 3. A detail floor plan of proposed use, conversion of single family dwelling shall have measurement of all habitable space. Accurate drawing of a proposed sign including dimensions and illustration signed by sign supplier. <u>Any addition or accessory uses or fences must have a Plot Plan and/or Survey.</u> Additions/Fences must be presented on a Plot Plan/Survey with rear and side set back. You can obtain a Plot Plan from the Engineering Dept. located in City Hall, Room 325. *(copy of all/any plans must accompany application.
- 4. Completed attached Tax Certification (City of Camden Tax Office Room 117 1st floor and Water/Sewer is located in the Room 117, 1st floor)

| 5. | Application fee: | | | | | |
|----|--|-----------|--|--|--|--|
| | (non-refundable) | | | | | |
| | Single Family Dwelling | \$ 69.56 | | | | |
| | Two-Family Dwelling | \$ 139.13 | | | | |
| | Three-Family Dwelling | \$ 215.51 | | | | |
| | Or More | | | | | |
| | Rooming House | \$ 259.16 | | | | |
| | Boarding House | \$ 259.16 | | | | |
| | Commercial Use | \$ 87.30 | | | | |
| | Industrial Warehousing | | | | | |
| | & Manufacturing Use | \$ 139.87 | | | | |
| | Institutional Use | \$ 69.56 | | | | |
| | Advertising Billboards | \$ 395.56 | | | | |
| | Sign Application | \$ 79.11 | | | | |
| | Rezoning Application | \$ 345.09 | | | | |
| | Money Order or Check payable to the City | of Camden | | | | |

PLEASE RETURN COMPLETED APPLICATIONS TO THE ABOVE ADDRESS. **INCOMPLETE APPLICATIONS SHALL NOT BE PROCESS.** <u>ANY APPLICATION WHICH REMAINS INCOMPLETE FOR MORE THAN 10 BUSINESS DAYS WILL BE DISCARDED.</u> FALSIFICATION IN ANY FORM SHALL SUBJECT APPLICANT TO A FINE OR MUNICIPAL COURT.

No construction, erection, alteration, repair, remodeling, conversion, renovation or demolition of any building or structure shall begin prior to Zoning approval. Other municipal agency approvals maybe required.

DO NOT REMOVE OR DISCARD ANY PART OF THIS APPLICATION

I. <u>GENERAL</u>

| () owner () tenant () agent/owner nit () Sign Permit |
|---|
| |
| nit () Sign Permit |
| |
| |
| <u>NER</u> if different from that of applicant: |
| |
| |
| er for which zoning/sign permit is desired: |
| Block:Lot: |
| C2 C3 C4 LII LI2 GI1 GI2 TOD MW1 MW2 MS CV2 CC |
| |
| being used <i>entirely as:</i> |
| |
| |
| |
| |
| If so how long? |
| |

II. <u>ZONING</u>

| 1. | What is being proposed? | | | | | | |
|----|---|--|--|--|--|--|--|
| | New Construction Addition Fence (ht) Installation | | | | | | |
| | New Business Conversion Other (explain:) | | | | | | |
| 2. | Describe in detail the use & activities PROPOSED (attached separate sheet if necessary): | | | | | | |
| 3. | Are there other activities existing within the same property?(please describe) | | | | | | |
| 4. | Dimensions of Principal Building and/or structure | | | | | | |
| 5. | Dimensions of All Accessory Building and/or structure | | | | | | |
| 6. | Are any of the activities conducted in the principal building existing as a nonconforming use? No Yes (please explain) | | | | | | |
| 7. | To the applicant's knowledge, has there been any prior applications made to the Zoning Board of Adjustment or the Planning Board? | | | | | | |
| | No Yes (please explain) | | | | | | |
| == | THIS APPLICANT CERTIFIES THAT THE ABOVE INFORMATION HAS BEEN COMPLETED TO THE BEST OF HIS/HER KNOWLEDGE. | | | | | | |

(Date)

(Signature of Applicant)

(Name of Corporation or Association)

III. <u>SIGN</u>

| 1. Type Sign: Awning / Billboard / Freestanding / Hanging / Mounted / Off Site / Window (please circle) | | | | | | |
|---|---|--|--|--|--|--|
| | | _ Alteration of an existing sign | | | | |
| | · · · · | (attach photo & describe) | | | | |
| 2. | Are there any existing signs? | (if yes, please attach photos) | | | | |
| 3. | How many signs are proposed? | | | | | |
| 4. | Will signs(s) be illuminated? Yes | No / (#4) | | | | |
| 5. | Dimension:X= | | | | | |
| 6. | Distance between ground and the lowest pa | | | | | |
| 7. | Distance between ground and highest part | of the signft. $(\#6)$ | | | | |
| 8. | Material of Sign: | | | | | |
| 9. | Color(s) on sign(s): | | | | | |
| 10. | Illustration/Wording: | | | | | |
| | | | | | | |
| | | | | | | |
| | | IE ABOVE INFORMATION HAS BEEN COMPLETED GE AND FURTHER UNDERSTANDS THAT <u>IF THE SIG</u> | | | | |
| EX | CEEDS THE MAXIMUM REQUIREMI | ENT A VARIANCE THROUGH THE PLANNING BOAR | | | | |
| OF | THE CITY OF CAMDEN MUST BE RI | EQUESTED. | | | | |

(Date)

(Signature of Applicant)

(Name of Corporation or Association)

DO NOT REMOVE OR DISCARD ANY PART OF THIS APPLICATION

IV. ASSESSMENT CERTIFICATION

Section A: Applicant shall complete

| SECTION A | <u>OWNER</u> | | | | | | |
|---------------------------|--------------|--|--|--|--|--|--|
| Name of OWNER of Property | | | | | | | |
| Address: | | | | | | | |
| SEARCH Address: | | | | | | | |
| Block: Lot: | Account: | | | | | | |

Section B: <u>Applicant shall take this form to the City of Camden Tax Office, Room 117</u> (1st floor) for completion to indicate whether taxes are paid up to date. Also for water and sewer to make sure water /sewer is paid up to date. Upon completion, this form shall be submitted with original application. NO APPLICATIONS WILL BE ACCEPTED – if any money is owed for Taxes or Water/Sewer, no permit can be issued until accounts are paid in full-proof of payment must be brought back before turning application in.

Section C:

TAX OFFICE & PNC BANK

An application for Zoning/Sign permit has been submitted to the Division of Planning. Please check your records to be certain that the account is current

I HEREBY CERTIFY THAT THE PROPERTY ASSESSMENT ARE: **MORTGAGE LETTERS ON LETTERHEAD WILL BE ACCEPTED FOR SALE/RESALE PROPERTIES ONLY**

| Account Type | Qtr. | Due date | Amount Owed | Other |
|------------------|------|----------|-------------|-------|
| (Taxes/W&S/Other | | | | |
| COMMENTS: | | | | |
| | | | | |
| | | | | |
| | | | | |

DATED: _____

PREPARED BY: _____