



Cresskill Building Department
 67 Union Avenue, Cresskill New Jersey 07626
 Construction Official & Zoning Officer, Bob Rusch
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Temporary Sign Permit Application

Block: _____ Lot: _____ Permit#: **S** _____

Type of sign: Wall _____ Ground _____ Other _____

Exact wording on sign: _____

Purpose of sign: Land Sale _____ Building Sale _____ Contractor/Builder _____ Other _____

Address where sign will be located: _____

****Temporary Signs must be located no closer than **20 feet** to any street line and **15 feet** to any property line****

Sign Details: One or two sided _____ Total area each side (square feet) _____

Material of sign _____ Colors used _____

Any other signs on the property? Yes / No *If yes, complete the following*

Number of existing signs: _____ **Area of each sign:** _____ **Locations:** _____

Realtor: Name _____

Address _____

Email _____ Phone # _____

Owner: Name _____

Address _____

Email _____ Phone # _____

By signing this application, you are allowing the Borough inspector access to your property to ensure all work is done as described and approved

Signature of Owner

Signature of Applicant

Construction Official Date

Fee amount paid: \$50
 Time period: 6 months
 Check # _____
 App # _____