

# Sign Permit Application

## Location of Proposed Work or Improvement

Municipality: \_\_\_\_\_ Borough Township

Site Address: \_\_\_\_\_ Tax Parcel: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Zoning District: \_\_\_\_\_ Lot Frontage: \_\_\_\_\_

Property Owner(s): \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

Principal Contractor: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

Design Professional / Architect: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

## Sign Details

Dimensions of Proposed Sign(s):    Sign #1        Width \_\_\_\_\_ Height \_\_\_\_\_ Depth \_\_\_\_\_

   Sign #1        Width \_\_\_\_\_ Height \_\_\_\_\_ Depth \_\_\_\_\_

   Sign #1        Width \_\_\_\_\_ Height \_\_\_\_\_ Depth \_\_\_\_\_

Estimated Cost: \$ \_\_\_\_\_

## Applicant Certification

The applicant certifies that all information on this application is correct and the work will be completed in accordance with additional approved building code requirements or zoning ordinance adopted by the Municipality. Issuance of a permit shall not be construed as authority to violate, cancel or set aside any provisions of the codes or ordinances of the Municipality or any other governing body. The applicant certifies he/she understands all the applicable codes, ordinances and regulations. Application for a permit shall be made by the owner or lessee of the building or structure, or agent of either, or by the registered design professional employed in connection with the proposed work.

I certify that the code administrator or the code administrator's authorized representative shall have the authority to enter areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit.

I certify that I am aware of the municipality's sign ordinance and I am aware that this application must be accompanied by the following:

- **A conceptual drawing or photograph showing the placement of the proposed sign(s) on the building or property.**
- **A drawing or photograph detailing the dimensions of any existing signs that are to remain on the building or property.**
- **A drawing or photograph detailing the dimensions of the exterior wall to which a proposed wall mounted sign is to be attached, if applicable.**
- **A copy of the sign specifications as supplied by the principal contractor.**
- **A color photograph of the proposed work location.**

Finally, I am aware that a copy of the permit shall be kept on the site of the work until the completion of the project.

\_\_\_\_\_  
Signature of Owner or Authorized Agent

\_\_\_\_\_  
Print Name of Owner or Authorized Agent

\_\_\_\_\_  
Address

\_\_\_\_\_  
Date:

I would like to receive my permit electronically (residential permits only)

Email Address: \_\_\_\_\_

### FOR MUNICIPAL OFFICE USE ONLY

PERMIT NUMBER: \_\_\_\_\_ DATE: \_\_\_\_\_

TOTAL FEE: \$ \_\_\_\_\_ COLLECTED BY: \_\_\_\_\_

#### **PERMIT APPROVAL**

APPROVED ( ) DISAPPROVED ( ) \_\_\_\_\_ DATE: \_\_\_\_\_  
BUILDING CODE OFFICIAL / ZONING OFFICER