

Upper Salford Township P.O. Box 100

P.O. Box 100 Salfordville, PA 18958-0100 610-287-6160

APPLICATION FOR SIGN PERMIT

1.	NAME AND ADDRESS OF APPLICANT:
2.	PHONE NUMBER:E-MAIL ADDRESS:
	OWNER OF PREMISES (IF SAME AS ABOVE PLEASE NOTE)
4.	NAME OF COMPANY PERFORMING CONSTRUCTION/ALTERATION
5.	ZONING DISTRICT
	TYPE OF SIGN PROPOSED
7.	CONSTRUCTION MATERIAL PROPOSED
8.	APPROXIMATE VALUE OF SIGN AND INSTALLATION
9.	INDICATE WHETHER SIGN IS: "TEMPORARY" OR "PERMANENT"
10.	INDICATE WHETHER SIGN IS: "ON PREMISES" OR "OFF PREMISES"
11.	LOCATION/ADDRESS OF SIGN LOCATION
	EXACT WORDING OF SIGN DESCRIBE METHOD OF ILLUMINATION
	SITE PLAN DRAWN TO SCALE MUST INCLUDE THE FOLLOWING: A. LOCATION OF SIGN RELATIVE TO LOT BOUNDARIES B. DIMENSIONS OF SIGN AND DIMENSIONS OF STRUCTURE TO WHICH IT IS ATTACHED OR ADJACENT TO. C. LOCATION OF SIGN IN RELATION TO STRUCTURE TO WHICH IT IS ATTACHED OR ADJACENT TO. D. LINEAR FEET OF BUILDING FRONTAGE OR PORTION OF BUILDING THAT SIGN IS RELATIVE TO. E. ELEVATION DRAWING OF PROPOSED SIGN SHOWING DIMENSIONS, CAPTION, COLOR AND DESIGN. F. STRUCTURAL DETAILS OF CONSTRUCTION G. LOCATION AND SIZE OF EXISTING SIGNS CURRENTLY ON PROPERTY. ealed plans must be provided for all non-residential signs.
J	outou plane muot de proviueu for un non recidential signe.
SIG	SNATURE OF APPLICANT DATE