

# SIGN APPLICATION

**RICHLAND TOWNSHIP**  
322 SCHOOLHOUSE ROAD, SUITE 110  
JOHNSTOWN, PA 15904  
(814) 266-2922 FAX (814) 266-2024

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

Business Name: \_\_\_\_\_

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

Contact Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Contractor's Name: \_\_\_\_\_

Richland Township Contractor Number (If Applicable): \_\_\_\_\_

## Type Of Sign- Check All That Apply

\_\_\_\_\_ Freestanding \_\_\_\_\_ Exterior Wall Mounted \_\_\_\_\_ Interior Store Front

\_\_\_\_\_ Temporary \_\_\_\_\_ Directional \_\_\_\_\_ Other (Specify) \_\_\_\_\_

## Type Of Work (Check All Applicable)

\_\_\_ New \_\_\_ Replacement \_\_\_ Addition \_\_\_ Repair

DESCRIBE WORK: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## DESCRIPTION

METHOD OF LIGHTING: \_\_\_\_\_

**ALL ELECTRICALLY ILLUMINATED SIGNS SHALL BE INSPECTED BY A CERTIFIED ELECTRICAL INSPECTOR AND PROOF OF SAME MUST BE FORWARDED TO THE RICHLAND TOWNSHIP OFFICE**

(OVER)

SIGN CONSTRUCTION/MATERIALS: \_\_\_\_\_

TOTAL SQUARE FOOTAGE (EACH SIGN): \_\_\_\_\_

DISTANCE TO TOP OF SIGN: \_\_\_\_\_

DISTANCE TO BOTTOM OF SIGN: \_\_\_\_\_

**PLANS- DRAWN TO SCALE**

**1. SITE PLAN**

-SHOW EXACT LOCATION WITH DIMENSIONS OF EACH SIGN EXISTING AND/OR PROPOSED ON THE PREMISES.

**2. DRAWING OF SIGN(S)**

-SHOW EXACT DIMENSIONS AND THE SHAPE OF EACH SIGN EXISTING AND/OR PROPOSED ON THE PREMISES.

-SHOW SIGN MESSAGE.

**COST OF SIGN (MATERIALS, CONSTRUCTION AND INSTALLATION): \$ \_\_\_\_\_**

**CERTIFICATION**

I HEREBY CERTIFY THAT I AM THE OWNER OF RECORD OF THE NAMED PROPERTY, OR THAT THE PROPOSED WORK IS AUTHORIZED BY THE OWNER OF RECORD AND THAT I HAVE BEEN AUTHORIZED BY THE OWNER TO MAKE THIS APPLICATION AS HIS/HER AUTHORIZED AGENT AND I AGREE TO CONFORM TO ALL APPLICABLE LAWS OF THIS JURISDICTION. IN ADDITION, IF A PERMIT FOR WORK DESCRIBED IN THIS APPLICATION IS ISSUED. I CERTIFY THAT THE CODE OFFICIAL OR CODE OFFICIAL'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.

NAME: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ PHONE NO.: \_\_\_\_\_

**DO NOT WRITE BELOW THIS LINE**

**ZONING FEE:** \_\_\_\_\_

**PERMIT NO.:** \_\_\_\_\_

**BUILDING FEE:** \_\_\_\_\_

**PA UCC:**       \$4.00      

**TOTAL FEE:** \_\_\_\_\_

**REVIEWED BY:** \_\_\_\_\_

**DATE:** \_\_\_\_\_

\_\_\_\_\_ **APPROVED**

\_\_\_\_\_ **DISAPPROVED**

**REASON DISAPPROVED:** \_\_\_\_\_

**COMMENTS:** \_\_\_\_\_

\_\_\_\_\_