

SIGN APPLICATION

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

Date Received:

Property Owner:

Address: City: State: Zip:

Phone: Alternate Phone:

Applicant Name:

Address: City: State: Zip:

Phone: Alternate Phone:

Contractor: Phone:

Address: City: State: Zip:

Richland Twp Contractor's License # PA Contractor's License #

Type Of Sign (Check All That Apply):

Freestanding Exterior Wall Mounted Interior Store Front Temporary Other*

*If other, please specify:

Type Of Work (Check All That Apply):

New Replacement Addition Repair Other*

*If other, please specify:

DESCRIPTION OF WORK:

METHOD OF LIGHTING:

SIGN CONSTRUCTION/MATERIALS:

TOTAL SQUARE FOOTAGE (EACH SIGN):

DISTANCE TO TOP OF SIGN:

DISTANCE TO BOTTOM OF SIGN:

PLANS REQUIRED (DRAWN TO SCALE)

1. SITE PLAN

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

2. SIGN(S) PLAN

- 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. 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:

Address:

Phone No.:

Signature: _____ Date: _____

This Box For Office Use Only:

Review: \$ _____

Inspections: \$ _____

PA UCC: \$ _____ 4.50 _____

Total: \$ _____

PERMIT # _____

Richland Township Zoning Officer

Date Approved: _____