

# APPLICATION FOR SIGN PERMIT

Address: \_\_\_\_\_ Zoning District: \_\_\_\_\_

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

Name of Owner(s): \_\_\_\_\_ Phone # \_\_\_\_\_

Email (please print) \_\_\_\_\_

Sign Contractor: \_\_\_\_\_ Phone # \_\_\_\_\_

Email (please print) \_\_\_\_\_

New sign(s) applied for: **Low-Profile ( )** **Wall ( )** **Pole ( )** **Temporary ( )**

**Low-Profile:** \_\_\_\_\_ X \_\_\_\_\_ Height: \_\_\_\_\_ Sq. Ft.: \_\_\_\_\_

Setbacks- Front: (Measured from Right Of Way): \_\_\_\_\_ Sides: \_\_\_\_\_ and \_\_\_\_\_

**Wall:** \_\_\_\_\_ X \_\_\_\_\_ Height from Grade: \_\_\_\_\_ Sq. Ft.: \_\_\_\_\_

Linear Frontage of Building: \_\_\_\_\_

**Pole:** \_\_\_\_\_ X \_\_\_\_\_ Total Height: \_\_\_\_\_ Sq. Ft.: \_\_\_\_\_

Setbacks- Front: (Measured from Right Of Way): \_\_\_\_\_ Sides: \_\_\_\_\_ and \_\_\_\_\_

**Temporary:** \_\_\_\_\_ X \_\_\_\_\_ Type of Sign: \_\_\_\_\_ Sq. Ft.: \_\_\_\_\_

If Low-Profile: Setbacks- Front: (Measured from Right Of Way): \_\_\_\_\_

Sides: \_\_\_\_\_ and \_\_\_\_\_

Purpose of Sign: \_\_\_\_\_

Date requested to be put up: \_\_\_\_\_ Date will be taken down: \_\_\_\_\_

Describe All Existing Signage Present at Site: \_\_\_\_\_

The undersigned state(s) that this Application and the attached site plan are true, accurate and complete with all required documentation. Spencer Township relies on the completeness, relevancy, and accuracy of the Application for Sign Permit. All signs are subject to regulations in the Spencer Township Zoning Resolution. Any certificate issued upon a false statement of any fact, which is material to the issuance hereof, shall be void.

Submitted by (Please Print): \_\_\_\_\_

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

Office Use Only <input type="checkbox"/>	
ZS _____	Rec'd By _____ Date Received _____
Fee \$ _____	<input type="checkbox"/> Cash <input type="checkbox"/> Check # _____ Receipt # _____
ZP _____	Date Issued _____
E-A (date) _____	