

Issue Date _____
Tax Parcel No. _____
Permit Fee _____
Expiration Date . _____

Zoning District _____
Permit No. _____

Date Stamp _____

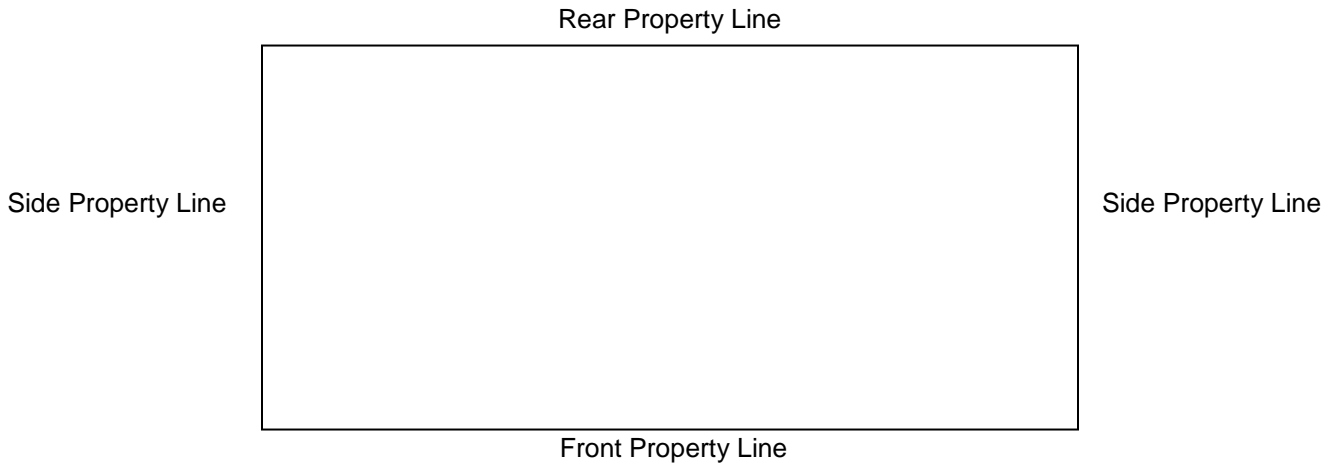
ZONING PERMIT APPLICATION FACT SHEET

Sign Construction

Municipality _____
Name _____
Phone No. _____
Address _____
Subdivision _____ Lot No. _____

Contractor _____
Phone No. _____
Address _____
Cell No. _____
Estimated Cost _____

I. Complete the diagram. Show setback lines for existing structures – building, sign, etc. and proposed sign construction.



NOTE: If applicable, you must show location of on-lot septic system

II. **Sign:**

A free standing sign requires a commercial building permit in addition to this zoning permit.

1. Type of Business: _____
2. Purpose to: Erect Repair Ground sign Off-site sign
3. Wall sign Post sign Roof sign Ground sign
4. Size of sign _____ Total sq. ft. _____
5. Size of post or column _____ Depth of Footing _____
6. Clearance to grade _____ Overall height _____
7. Material used: Glass Wood Steel Plastic
8. Distance from edge of road _____
9. Number of existing signs _____ Size and type _____
10. Dimensions of building front: Height _____ Width _____

Note: A sketch of the sign must accompany applications.

FINAL INSPECTION REQUIRED - CALL TECHNICON ENTERPRISES INC., II (610) 286-1622

APPLICANT

DATE

INSPECTION APPROVED INSPECTION DISAPPROVED

CODE ENFORCEMENT/ZONING OFFICER APPROVAL

DATE

INSPECTION DATE _____