

## **BOROUGH OF PERKASIE**

620 W. Chestnut Street PO Box 96 Perkasie, Pa. 18944-0096 (215) 257-5065 Fax (215) 257-6875

Fee: \$125.00 up to 6 sq ft \$200.00 over 6 sq ft \$50.00 temporary Date:\_\_\_\_\_

## APPLICATION FOR SIGN PERMIT

Location of Sign:		Tax ID #:		
		Owner Phone:		
	er Address			
Applicant:				
Applicant Name:		Applicant Phone:		
Applicant Add	lress:			
Installer:				
		Installer Phone:		
	ess:			
Sign Descript				
Type of Sign: Projecting □		Parallel	Freestanding	
	(includes awnings and canopies)	(includes window signs)	(includes roof signs)	
Size of Sign (in square feet):		Height of Sign:		
Constructed of	:. 			
Illumination:	Direct □	Indirect □	Non Illuminated □	
Intent:	Temporary □	Permanent □		
Location:	On Premises □	Off Premises □		
Site Descripti	on:			
Square Footage of Building's Facade:		Height	Length	
Zoning Distric	t:			

Please draw a plot plan on a separate piece of paper showing the location of the sign in relation to the front and side property lines.

Please attach a drawing of the sign, including all lettering, wording, designs and/or symbols.

Is this sign for a new business, chang	e in use or change in ownership?	Yes □	No □			
If yes, you must apply for a Use & Oapplication, fill it out completely and						
I hereby certify that the information of knowledge, and that all work will be	* *		•			
Signature of Contractor	Da	ate				
I hereby certify that the information of knowledge, that the erection of the pr Borough regulations relating to signs	oposed sign has my approval, an					
Signature of Owner of Premises	Da	ate				
Signature of Applicant	Da	ate				
Do not write below this line						
Approved □ Not Approved □	Signature of Zoning Offi	cer				
Comments:	Date					