

**NETHER PROVIDENCE TOWNSHIP
214 SYKES LANE
WALLINGFORD, PA 19086
OFFICE (610) 566-4516 FAX (610) 892-2890**

APPLICATION FOR SIGN PERMIT - \$50.00 PER SIGN FEE

Name of Owner: _____ Phone No.: _____

Email Address: _____

Address of Owner: _____

Site Location (attach map): _____

Sign Company Name: _____ Phone No.: _____

Email Address: _____

Address of Sign Company: _____

Plans.

(1) The dimensions of the sign or billboard and, where applicable, the dimensions of the wall surface of the building to which it is to be attached.

(2) The dimensions of the sign or billboard supporting numbers and the maximum and minimum height of the sign.

(3) The proposed location of the sign in relation to the face of the building in front of which it is to be erected.

(4) The proposed location of the sign in relation to the boundaries of the lot upon which it is to be situated.

(5) Where the sign is to be attached to an existing building, a current photograph of the face of the building to which the sign is to be attached.

(6) A description of the construction details, materials of the sign structure, type of lettering and the intensity and type of lighting to be provided.

(7) A written statement showing the name of the owner of the sign, address, telephone number and the name of the person in control of the building or premises where such sign is to be located.

(8) The name of the sign contractor or erector is also required.

(9) The owner of any billboard shall provide the Township with a certificate of insurance issued by a qualified and licensed insurance company naming the Township as an additional insured against all claims in the face amount of \$250,000 for property damage and personal injury connected with said sign. The amount of the deductible pertaining to the Township shall not exceed \$2,500.

(10) A statement of valuation as to cost of construction.

For Office Use

Contract Workers Comp Plot Plan Building Plans/Material List/Sealed Plans

Permit Fee: _____

Fee Paid: Cash _____ Check _____ Date Paid: _____

Zoning Officer's Initials: _____ Approved or Disapproved Date: _____

Comments: