WRIGHTSTOWN TOWNSHIP, Bucks County, Pennsylvania

2203 Second Street Pike, Wrightstown, PA 18940-9662 215-598-3313 215-598-0529 FAX



Permit #:
Fee:
Check #:
Date:

SIGN PERMIT APPLICATION

SECTION 1 – Location of Proposed Sign: At Number Street Between____and___ (cross street) (cross street) Zoning District Tax Parcel No. Number and location of signs presently erected on this property: SECTION 11 – Identification: Owner of Premises (Name, Address, Phone): Tenant (if Purchasing or leasing sign):_____ Erector of Sign: SECTION 111 – General Information: Purpose of Sign: () Temporary () Permanent Description: (commercial advertisement, political, etc.) Type of Sign: () Wall Mounted () Free standing () Other Where sign is wall mounted, provide dimensions of wall area including windows and doors: _____feet wide by _____feet high equals_____square feet To be mounted on () front wall () side wall () other

When sign is free standing, complete the follow	owing:		
Distance of sign from edge of cartway or curb:		feet	
Distance of sign from legal right-of-way:		feet	
Distance of sign from side property line:		feet	
Distance of sign from nearest street or driveway:		feet	
Distance of bottom of sign from street centerline:		feet	
Distance of top of sign from ground l	evel:	feet	
Will sign be illuminated? () Ye	s () N	No	
Dimensions of sign: feet high by	feet long equals	square feet	
Estimated cost of sign including materials, lal	oor and Installation:		
I hereby certify that the information contained my knowledge, and that all work will be perfe			
Signature of Contractor		Date	
I hereby certify that the information contained my knowledge, that the erection of the propos all lawful Township regulations relating to sig	sed sign has my appro		
Signature of Owner of Premises		Date	
Signature of Tenant or Lessor		Date	
Signature of Owner of Sign		Date	
NOTICE: Application must be accompanied property lines and the location of all buildings			
Zoning Officer		 Date	