

**TOWAMENCIN TOWNSHIP**

1090 Troxel Rd, Lansdale, PA 19446  
Phone: 215-368-7602 Fax: 215-368-7650

**SIGN PERMIT APPLICATION**

APPLICANT: \_\_\_\_\_  
OWNER: \_\_\_\_\_ E-Mail: \_\_\_\_\_  
PROPERTY ADDRESS: \_\_\_\_\_ City: \_\_\_\_\_  
PHONE NO: \_\_\_\_\_ ZONING DIST: \_\_\_\_\_

BUSINESS TRADE NAME: \_\_\_\_\_  
SQUARE FOOTAGE OF SIGN: \_\_\_\_\_ COST OF SIGN: \_\_\_\_\_  
 NON RESIDENTIAL     RESIDENTIAL     POLITICAL

<p><b><u>SIGN ORDINANCE SECTION: 153-805</u></b> <b><u>SIGN DETAILS</u></b> (Please check the following)</p> <p><input type="checkbox"/> Illuminated    <input type="checkbox"/> Neon    <input type="checkbox"/> Roof</p> <p><input type="checkbox"/> Advertising    <input type="checkbox"/> Trade Name</p> <p><input type="checkbox"/> Free Standing    <input type="checkbox"/> Wall    <input type="checkbox"/> Landscape</p> <p><input type="checkbox"/> Directory    <input type="checkbox"/> Temporary</p>	<p><b><u>SIGN MATERIALS</u></b> (please check the following)</p> <p><input type="checkbox"/> Plastic    <input type="checkbox"/> Wood    <input type="checkbox"/> Metal    <input type="checkbox"/> Glass</p> <p><input type="checkbox"/> Masonry    <input type="checkbox"/> Stone    <input type="checkbox"/> Brick</p>
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**SPECIFIC REQUIRMENTS FOR ISSUANCE OF A PERMIT**

- 1) One application per grouping of signs
- 2) Two copies of scaled sign drawing with all dimensions and all supporting structures shown.
- 3) **All drawings must be accompanied with a plot plan showing the placement of the proposed sign and all setbacks from streets, sidewalks and bordering properties.**

APPLICANT SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

<b><u>OFFICIAL USE ONLY</u></b>	
Permit No. _____	Permit Fee _____
Zoning Officer _____	Date _____