



# TOWNSHIP OF HALFMOON

100 MUNICIPAL LANE · PORT MATILDA, PA 16870

TELEPHONE : (814) 692-9800

www.halfmoontwp.us

## APPLICATION FOR SIGN PERMIT

Name of Applicant: \_\_\_\_\_

Address of Applicant: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Name of Property Owner (if different): \_\_\_\_\_

Address of Property Owner (if different): \_\_\_\_\_

Phone Number: \_\_\_\_\_

Tax Parcel Number: \_\_\_\_\_

Sign Location (Street Number/Name): \_\_\_\_\_

Type of Sign (Please Circle One):

Projecting

Wall-Mounted

Ground-Pole

Directional

Off-Premises

Marquee

Temporary

Sign Information:

Square Feet Per Face: \_\_\_\_\_ sq. ft.      Square Feet Total Size: \_\_\_\_\_ sq. ft.

Horizontal Size: \_\_\_\_\_ ft.      Vertical Size: \_\_\_\_\_ ft.

Height Above Ground: \_\_\_\_\_ ft.

Ground or Roadway to Top of Sign: \_\_\_\_\_ ft.

Ground or Roadway to Bottom of Sign: \_\_\_\_\_ ft.

Is the Sign Permanent or Temporary? \_\_\_\_\_

If Temporary:

Date of Sign Placement: \_\_\_\_\_      Date of Sign Removal: \_\_\_\_\_

Sign Message: \_\_\_\_\_



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## **Applicant:**

The following needs to accompany this application:

1. Sketch plan of the property involved showing accurate placement thereon of the proposed sign and all existing signs on the property.
2. Two drawings of the plans and specifications of the sign, method of construction, attachment to the building or in the ground.
3. Plans and specifications should include details of dimensions, color, materials, and weight of the proposed sign and the dimensions of all existing signs.
4. Submit photographs of the sign if applicable.
5. Provide details regarding illumination of sign.

### **PLEASE NOTE**

An incomplete application will be returned without processing. The Zoning Officer will grant or deny all applications for sign permits within thirty (30) days of submission. A final inspection is required upon installation of the sign(s). Applicable building permits must be obtained.

**Applicant Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Action By Zoning Officer:**

( ) Approved

( ) Denied

**Remarks:** \_\_\_\_\_

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**Sign Permit Number:** \_\_\_\_\_