



Lower Southampton Township

Bucks County, Pennsylvania
1500 Desire Avenue – Feasterville, PA 19053
Phone: (215) 357-7300 – E-Mail: permits@lstwp.org

****OFFICE USE ONLY****

Date Received: _____

Permit No.: _____

SIGN PERMIT APPLICATION

I. SITE INFORMATION (Each line item **MUST** be completed)

WORK SITE ADDRESS:

Tax Parcel ID: **21** -

Property within Floodplain: Yes No *If yes, what is the market value of the property:*

II. CONTACT INFORMATION (Each line item **MUST** be completed)

*Please be advised: **ONLY APPLICANT** receives correspondence and/or permit.*

PROPERTY OWNER:

Mailing Address: _____ City: _____ State: _____ Zip: _____

E-Mail: _____ Phone No.: _____

APPLICANT:

Mailing Address: _____ City: _____ State: _____ Zip: _____

E-Mail: _____ Phone No.: _____

SIGN COMPANY:

(Contractor Registration Required \$150.00)

Person in Charge of Work:

Mailing Address: _____ City: _____ State: _____ Zip: _____

E-Mail: _____ Phone No.: _____

III. PROJECT DATA (COMPLETION MANDATORY)

TYPE: Ground Sign Plaza Sign Roof Sign Wall Sign Banner Advertising Flag Temporary

Sign Location:

Sign Dimensions: *Length* *Width* *Height* **TOTAL Square Feet:**

Sign Message:

How is sign to be secured: _____ Sign Illuminated UL Label

PROJECT TOAL COST:

APPLICATIONS MUST INCLUDE:

**Copy of final sign design, dimensions, placement, illumination type and schematics.
Ground Sign, Banner and Flag applications must include plot plan drawing illustrating proposed location of sign on property.**

IV. APPLICANT'S CERTIFICATION (Signature **REQUIRED**)

The undersigned owner or authorized agent hereby certify that:

- All information provided as a part of this application is true and correct.
- This project will be constructed in accordance with the approved drawings and specifications (including any non-design changes).
- That all work will be performed and completed in accordance with the rules and regulations set forth in Lower Southampton Twp. ordinance.
- That all signs are subject to yearly inspections per Ordinance 558, Chapter 27, SS 2005.3

Applicant Signature: _____

Date: _____

****OFFICE USE ONLY****

Zoning Officer Decision Approved Denied

Zoning Officer Signature: _____

Date: _____