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.

APPLICANT:

Mailing Address: City: State: Zip:

E-Mail: Phone No.:

PROPERTY OWNER:

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 MANDITORY)*

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: