

SIGN PERMIT APPLICATION

Potter Township Zoning Department

124 Short Road, Spring Mills, PA 16875

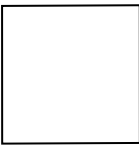
Phone (814) 364-9176 Ext. 102 Fax (814) 364-2809


A P P L I C A N T	Name: _____	Phone Number: _____
	Address: _____ _____	E-mail: _____
P R O P E R T Y	Owner Name: _____	Phone Number: _____
	Address: _____ _____	E-mail: _____

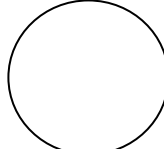
Type of Sign To Be Permitted: <input type="checkbox"/> Wall Sign <input type="checkbox"/> Billboard <input type="checkbox"/> Roof Sign <input type="checkbox"/> Projecting Sign <input type="checkbox"/> Ground Pole Sign <input type="checkbox"/> Business Identification Sign <input type="checkbox"/> Other _____	Sign Material <input type="checkbox"/> Wood <input type="checkbox"/> Metal <input type="checkbox"/> Other _____	Distance from Road Center or State R.O.W. _____ feet
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List Content of Sign & Attach Drawing _____ _____ _____ _____	I consent to the erection of this sign on my property. Signature: _____ <p style="text-align: center;">Property Owner</p> Date: _____
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Place the dimensions below the graphic that best represents the sign:


 _____ in. x _____ ft.


 _____ in. x _____ ft.


 _____ diam.


 _____ x _____ x _____ in./ft.

Official Use Only

SIGN: Conforming _____	Non-conforming _____	Zone: _____
TOTAL FEE \$ _____	Permit # S- _____	
PARCEL NO. _____	_____ Zoning Officer	