Permit No._____
Date_____

JACKSON TOWNSHIP

513 PIKE ROAD
JOHNSTOWN, PA 15909
PHONE: (814) 749-0725 / FAX: (814) 749-9390)

SIGN APPLICATION

PROPERTY ADDRESS OF SIGN:_____
_____

PROPERTY OWNER NAME: _____
Address: _____
Phone: _____
Cell Phone: _____
Email: _____

CONTRACTOR NAME: _____
Address: _____
Phone: _____
Cell Phone: _____
Email: _____

SIGNATURE OF APPLICANT: _____

WORKER'S COMPENSATION INFORMATION:
OR
LIABILITY INSURANCE:

TYPE OF SIGN - CHECK ALL APPLICABLE

☐ FREESTANDING ☐ DIRECTIONAL ☐ OTHER (SPECIFY)

☐ EXTERIOR WALL MOUNTED ☐ INTERIOR STORE FRONT

TYPE OF WORK - CHECK ALL APPLICABLE

☐ NEW ☐ REPLACEMENT ☐ ADDITION

DESCRIBE WORK:

_____
_____
_____
_____
_____

Fee $100.00

DESCRIPTION

METHOD OF LIGHTING:

ALL ELECTRICALLY ILLUMINATED SIGNS SHALL BE INSPECTED BY A CERTIFIED ELECTRICAL INSPECTOR AND PROOF OF SAME MUST BE FORWARDED TO THE JACKSON TOWNSHIP OFFICE

SIGN CONSTRUCTION/MATERIALS: _____

_____

TOTAL SQUARE FOOTAGE (EACH SIGN): _____

DISTANCE TO TOP OF SIGN:_____ DISTANCE TO BOTTOM OF SIGN_____

PLANS - DRAWN TO SCALE

SITE PLAN
- SHOW EXACT LOCATION WITH DIMENSIONS OF EACH SIGN EXISTING AND/OR PROPOSED ON THE PREMISES

DRAWING OF SIGN(S)
- SHOW EXACT DIMENSIONS AND THE SHAPE OF EACH SIGN EXISTING AND/OR PROPOSED ON THE PREMISES.
- SHOW SIGN MESSAGE.

COST OF SIGN AND INSTALLATION:_____

CERTIFICATION

I HEREBY CERTIFY THAT I AM THE OWNER OF RECORD OF THE NAMED PROPERTY, OR THAT THE PROPOSED WORK IS AUTHORIZED BY THE OWNER OF RECORD AND THAT I HAVE BEEN AUTHORIZED BY THE OWNER TO MAKE THIS APPLICATION AS HIS/HER AUTHORIZED AGENT AND I AGREE TO CONFORM TO ALL APPLICABLE LAWS OF THIS JURISDICTION. IN ADDITION, IF A PERMIT FOR WORK DESCRIBED IN THIS APPLICATION IS ISSUED. I CERTIFY THAT THE ZONING OFFICER OR ZONING OFFICIAL'S AUTHORIZED REPRESENTATIVE SHALL HAVE THE AUTHORITY TO ENTER AREAS COVERED BY SUCH PERMIT AT ANY REASONABLE HOUR TO ENFORCE THE PROVISIONS OF THE CODE(S) APPLICABLE TO SUCH PERMIT.

NAME:_____ SIGNATURE:_____

ADDRESS:_____ PHONE NO. _____

DO NOT WRITE BELOW THIS LINE

Review Fee	_____	
Permit Fee	_____	
Use & Occupancy Fee	_____	
Total Fee	_____	Date Paid _____

Permit Approved Permit Refused

Reason for Disapproval:

This permit shall expire ninety (90) days from the date of issuance if the work described in the permit is not begun. If the work has begun, the permit shall expire after two (2) years from the date of issuance thereof. In the event this permit is denied, you have 30 days from the denial date to file an appeal with the Zoning Hearing Board.

Fee $100.00