



Township of Newtown

209 Bishop Hollow Rd, Newtown Square, PA 19073
tel: 610-356-0200 * fax: 610-356-8722
www.newtowntownship.org

Sign/Banner Permit

Permit # _____

Date Issued: _____

By: _____

Work Site Location: _____

Legal Owner: _____

Phone: _____ Email: _____

Primary Contractor: _____

PA AG#: _____ Exp: _____

Address: _____

Phone: _____ Fax: _____

Email: _____

Permit Application Requirements:

1. Provide a Site Plan showing existing features at the property including streets, right of ways and property lines.
2. Provide details of the proposed sign including anchoring, dimensions, height and width, and electrical details
3. Permanent signs must have plan details signed and sealed by a design professional Profession/Business use being advertised: _____

Zoning District: _____ Is this a corner lot? Yes No

Total Proposed Sign Area: _____

What is the width of the principal building as it faces the street? _____ feet

For Banners provide dates banner will be displayed: _____

Are there Existing Sign(s)?

Location: _____ Type: _____ Area: _____ Height: _____

Location: _____ Type: _____ Area: _____ Height: _____

Proposed Sign(s):

Location: _____ Type: _____ Area: _____ Height: _____

Location: _____ Type: _____ Area: _____ Height: _____

Cost of Work (completed by Contractor): Building: _____

Electrical: _____

Comments from Code Dept: _____

Tax Parcel #: 30-00-_____

A copy of the contractor insurance certificate or waiver must be included with the permit application. No applications will be reviewed without this information included with the permit application.

Insurance Certificate included? Yes No

If your project requires multiple contractors, please include the "Permit Contractor List Form" with your permit application, along with insurance certificates or waivers for all contractors included in the project.

Add Contractor sheet included? Yes No

I hereby certify that I am the (agent of) owner of record and am authorized to make this application and perform the work listed on this Application. Also, I acknowledge I am responsible for scheduling all required inspections of work.

Signature: _____

Applicant/Contractor

Date

Building: _____

Electrical: _____

L&I Fee: _____

Total all Permits: \$ _____

Property Address: _____