

Permit No. \_\_\_\_\_  
Date \_\_\_\_\_

**JACKSON TOWNSHIP**

513 Pike Road

Johnstown, PA 15909

Phone: (814) 749-0725 / Fax: (814) 749-9390 / Email: office@jacksontwppa.com

**SIGN APPLICATION**

**PROPERTY OWNER INFORMATION**

BUSINESS NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CONTACT: \_\_\_\_\_

PHONE NO.: \_\_\_\_\_ CELL PHONE NO.: \_\_\_\_\_

CONTRACTOR'S NAME: \_\_\_\_\_

CONTRACTOR'S ADDRESS: \_\_\_\_\_

PHONE NO.: \_\_\_\_\_ CELL PHONE NO.: \_\_\_\_\_

**TYPE OF SIGN - CHECK ALL APPLICABLE**

- FREESTANDING       DIRECTIONAL       OTHER (SPECIFY)  
 EXTERIOR WALL MOUNTED       INTERIOR STORE FRONT       LED

**TYPE OF WORK - CHECK ALL APPLICABLE**

- NEW       REPLACEMENT       ADDITION

DESCRIBE WORK: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**DESCRIPTION**

METHOD OF LIGHTING: \_\_\_\_\_

SIGN CONSTRUCTION/MATERIALS: \_\_\_\_\_

TOTAL SQUARE FOOTAGE (EACH SIGN): \_\_\_\_\_

LENGTH \_\_\_\_\_ WIDTH \_\_\_\_\_ HEIGHT \_\_\_\_\_

**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: \_\_\_\_\_

SIGNATURE OF APPLICANT: \_\_\_\_\_

The information provided is true to the best of my knowledge.

**DO NOT WRITE BELOW THIS LINE  
(TOWNSHIP USE ONLY)**

Permit Approved \_\_\_\_\_  
Zoning Officer

Permit Refused \_\_\_\_\_  
Zoning Officer

Reason for Disapproval: \_\_\_\_\_

Permit Fee	_____
Date Paid	_____