

# DELAWARE TOWNSHIP

## ZONING PERMIT SIGN APPLICATION

# _____
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TEMPORARY SIGNS WILL BE REMOVED ON OR BEFORE

\_\_\_\_\_ \* \_\_\_\_\_ \* \_\_\_\_\_  
FILE DATE POSTING/ERECTING DATE

APPLICANT: NAME: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
TELEPHONE: \_\_\_\_\_

REFERE TO ORDINANCE 111.12	<input type="checkbox"/> TEMPORARY
TYPE SIGN: <input type="checkbox"/> ON-PREMISE <input type="checkbox"/> OFF-PREMISE <input type="checkbox"/> BILLBOARD	<input type="checkbox"/> CONSTRUCTION
<input type="checkbox"/> NON-BUSINESS <input type="checkbox"/> INSTITUTIONAL <input type="checkbox"/> PRIVATE COMMUNITY	<input type="checkbox"/> REAL ESTATE
SIZE: _____	<input type="checkbox"/> POLITICAL
	<input type="checkbox"/> EVENT
	QUANTITY _____

CONSTRUCTION: \_\_\_\_\_  
\_\_\_\_\_

CONTENT: \_\_\_\_\_  
\_\_\_\_\_

ATTACH SKETCH AND CONSTRUCTION DETAILS LOCATION	APPROVAL OF PROPERTY OWNER (SIGNATURE)
1. _____	** _____
2. _____	** _____
3. _____	** _____

UTILITY COMPANY APPROVAL: \_\_\_\_\_  
(WHEN REQUIRED)

I ACCEPT THE CONDITIONS SET FORTH IN THE FEE SCHEDULE FOR TEMPORARY SIGNS AS DETERMINED BY THE DELAWARE TOWNSHIP BOARD OF SUPERVISORS.

\_\_\_\_\_ TOWNSHIP SIGNATURE \_\_\_\_\_ APPLICANT'S SIGNATURE