

**APPLICATION AND PERMIT FOR SIGNS AND ZONING**

Property Address: \_\_\_\_\_ Permit No.: \_\_\_\_\_

Tax Assessment No.: \_\_\_\_\_ Zoning: \_\_\_\_\_ Date of Application: \_\_\_\_\_

Type of Sign: \_\_\_\_\_ On- Site Business \_\_\_\_\_ Announcement \_\_\_\_\_ Billboard \_\_\_\_\_ Wall \_\_\_\_\_ Pole  
\_\_\_\_\_ Shopping Center \_\_\_\_\_ Portable \_\_\_\_\_ Off Site Business

Dimension of Sign: Length \_\_\_\_\_ ft., Width \_\_\_\_\_ ft., Height Above Ground \_\_\_\_\_ ft. (To Top)  
(Must provide a drawing of sign with proposed wording.)

Type of Construction: Frame \_\_\_\_\_, Aluminum \_\_\_\_\_, Masonry/Stone \_\_\_\_\_, Other \_\_\_\_\_, Illuminated \_\_\_\_\_

Sign Setbacks: \_\_\_\_\_ Front (Or Road R/W), \_\_\_\_\_ Side, \_\_\_\_\_ Side, \_\_\_\_\_ Rear  
(Must provide plot plan of property showing all existing buildings, roads, other signs, etc and proposed sign and proposed setbacks.)

Other Signs On Property: \_\_\_\_\_ (If so, provide list of sizes and location) \_\_\_\_\_

Width of Lot Frontage \_\_\_\_\_ Width of Building or Tenant Space \_\_\_\_\_

PennDOT (724-439-7275) Permit required? \_\_\_\_\_ Work Starts: \_\_\_\_\_ Work Completed: \_\_\_\_\_

Estimated Construction Cost: \$ \_\_\_\_\_ Fee \$ \_\_\_\_\_ Date Paid \_\_\_\_\_

Contractor : \_\_\_\_\_ Address \_\_\_\_\_ Phone \_\_\_\_\_

Business: \_\_\_\_\_ Address \_\_\_\_\_ Phone \_\_\_\_\_

Property Owner: \_\_\_\_\_ Address \_\_\_\_\_ Phone \_\_\_\_\_

**I hereby affirm that the above information is true and correct and the Permit shall be complied with in accordance with all applicable Township Ordinances and any and all other applicable State and Federal requirements. I also understand that persons aggrieved by the issuance of this permit have the right to appeal as per the Pennsylvania Municipalities Planning Code, Act of 1968, P.L. 805 No. 247 as reenacted and amended, Section 914, 1, A. The Township reserves the right to suspend or revoke this permit for unauthorized changes, incorrect/incomplete application information, or issuance in error. It is applicant's sole responsibility to contact the Department of Labor and Industry to conduct plan review and obtain their additional permit prior to commencement of construction and to obtain the required inspections as per Act 45 of 1999. This permit does not include that approval.**

Signature of Property Owner: \_\_\_\_\_ Date: \_\_\_\_\_

**APPLICATION WILL BE RETURNED IF ALL QUESTIONS ARE NOT ANSWERED AND BOTH DRAWINGS ARE NOT PROVIDED.**

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REVIEW OF APPLICATION AND ISSUANCE OF PERMIT

Date: \_\_\_\_\_ ( ) The application is hereby approved and permit is issued.

Date: \_\_\_\_\_ ( ) The application is hereby rejected for the following reasons:

TOWNSHIP OF ROSTRAVER  
WESTMORELAND COUNTY, PA

\_\_\_\_\_  
ZONING OFFICER

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CERTIFICATE OF COMPLETION AND ZONING

In accordance with the appropriate Township Ordinance the work in connection with this permit has been reviewed and inspected and this certificate is issued:

DATE: \_\_\_\_\_ ZONING OFFICER: \_\_\_\_\_

NOTICE: THE INFORMATION IN THIS DOCUMENT IS SUBJECT TO DISCLOSURE.