



# TOWNSHIP OF WARWICK

Administration Building 1733 Township Greene, Jamison, PA 18929-1621

phone: 215/343-6100  
fax: 215/343-4407  
www.warwick-bucks.org

## Application for a Sign Permit

Property Owner & Contact: \_\_\_\_\_

Street Address: \_\_\_\_\_

City, State, ZIP Code: \_\_\_\_\_

Telephone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Tax Parcel Number: \_\_\_\_\_

Applicant's Name (if different from above): \_\_\_\_\_

Street Address: \_\_\_\_\_

City, State, ZIP Code: \_\_\_\_\_

Telephone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Circle one:    Temporary Sign (30 days or less)                      or                      Permanent Sign

If a temporary sign, dates of sign installation & removal: \_\_\_\_\_

Are you a school, college, church, hospital, civic group or non-profit organization?    YES    or    NO

Is the property located in a shopping center, industrial park, or office park?    YES    or    NO

Have you included electronic & paper color copies of the sign to scale?    YES    or    NO

Have you included a site plan showing the location of the sign?    YES    or    NO

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(please turn over)

Please describe the sign's size:

\_\_\_\_\_ inches in width (horizontal) \_\_\_\_\_ inches in height (vertical)

\_\_\_\_\_ distance from sidewalk/grade to the highest point of the sign above grade.

Please describe the sign's location:

\_\_\_\_\_  
\_\_\_\_\_

Please describe the sign's structure (electrical, wood, plastic, stakes, banner, etc.):

\_\_\_\_\_  
\_\_\_\_\_

Please describe the sign's text:

\_\_\_\_\_  
\_\_\_\_\_

Are there existing signs on site? If so, please give a detailed description including size, location, and text.  
*Digital photographs of existing signs would be appreciated.*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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*To be filled in my township staff:*

Zoning District (circle one):

RA	R-1	R-1a	R-2	RG	RR	MF-1	MF-2	MHP	C-1	C-2	C-3	V-C	V-CII	LI	O	H
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Is the property in the Corridor Overlay District? YES or NO

If in COD, date of BOS approval/denial: \_\_\_\_\_

Circle one: Permit Approved or Permit Denied

Reason for denial: \_\_\_\_\_

Zoning Officer: \_\_\_\_\_ Date: \_\_\_\_\_

Fee charged: \$ \_\_\_\_\_ Permit Number: \_\_\_\_\_