

LOWER OXFORD TOWNSHIP

Code Enforcement Officer

220 Township Road • Oxford • PA • 19363 • (Phone) 610-932-8150 Ext 3 • (Fax) 610-932-2367

Permit # LOT20-____-CS

Date Application Rec'd: _____

Commercial Sign Permit Application

Date Dept. Approved: _____

Development: _____
Tax Parcel No. _____ Zone: _____ Permit Fee: _____

OWNER/TENANT INFORMATION:

Table with 4 columns: Company & Contact Name, Mailing Address, Phone No. Fax No., E-Mail

ARCHITECT INFORMATION:

Table with 4 columns: Company & Contact Name, Mailing Address, Phone No. Fax No., E-Mail

CONTRACTOR INFORMATION:

Table with 4 columns: Company & Contact Name, Mailing Address, Phone No. Fax No., E-Mail

Location of Sign: _____

Applicant's Signature and Date fields with checkmarks

Building Code Official - Signature of Approval

Date

Please attach the following:

- Description of Sign (Including design, materials, and content)
Sketch of Sign (Include dimensions and total square footage of sign)
Description or type of Mounting (include mounting detail)
Stamped and sealed plans for signage
Contractor's Certificate of Liability

Special Instructions:

**Please contact Building Inspector, Scott Moran at 610-637-1003 at least 24 hours prior to inspection(s).

Blank lines for special instructions

Date to Treasurer: _____
Date to Inspector: _____

Date Payment Rec'd: _____
Check No.: _____

Sample Worksheet

Commercial Sign Permit

Name: _____

Address: _____

Tax Parcel No.: _____

Date: _____

Permit No: LOT20- - CS

Description	Amount	Qty./Sq. Ft.	Total	Acct #
Base Fee for each sign	\$ 25.00		\$	362.46
Plus .75 per sq. ft or part thereof	\$ 0.75		\$	362.46
Permanent Monument & Free Standing Signs (per sq. ft. or part thereof)	\$ 1.00		\$	362.46
Wall Signs or Channel Letters Plus .50 per sq. ft. or part thereof	\$ 0.50		\$	362.46
Temporary Sign	\$ 35.00		\$	362.46
Off-Premises & Joint (tenant) (Per Township Ordinances) §27-1804	\$ 50.00		\$	362.46
Plan Review Fee - TBD by Township Engineer or Bldg Inspector	\$ 100.00		\$	362.50
Inspections	\$ 100.00		\$	362.50
Total Fee			\$	

Description of Sign(s)	Sq. Ft.	Total Sq. Ft.
	Total Sq Ft or part thereof	

Office Use Only:

Code Enforcement Officer Approval: _____ Date: _____

Amount Received: \$ _____ Cash Check # _____ M.O. # _____

I, _____, Secretary/Treasurer, received cash in the amount of \$ _____ from the Code Enforcement Officer, _____ on _____ (Date).