

**Temporary Sign Permit Application
Plain Township Zoning Department**

Date _____ Application # _____

Name of Applicant _____

Address _____ Phone _____

Name of Business _____

Address _____ Phone _____

Type (Please check all that apply)

Lighted _____ Unlighted _____ Pole _____ Wall _____ Ground _____

Portable _____ Banner _____ Festoon/Balloon _____

On-Premise _____ Off-Premise _____ Interchangeable _____

One Sided _____ Two Sided _____ Individual Letters _____

**** Written authorization from the property owner is required for any off-premise sign and must be included with this application.****

Description of wording on sign: _____

Sign Dimensions: Width _____ Depth _____ Total Sq. Ft. _____

Total Height _____ (From ground level to top of sign)

Setbacks: Front _____ from right-of-way Rear _____ from property line

Side _____ from property line Side _____ from property line

Applicant Signature

Zoning District _____ Map Section _____ Sign Permit # _____

Fee _____ Receipt # _____ Ck _____ Cash _____ Expires _____

Date Approved _____

Date Denied _____

Zoning Director