



BUREAU OF CITY PLANNING AND ZONING

City Hall | 340 North Washington Avenue | Scranton, PA 18503 | p: 570.348.4280 | f: 570.348.4171

APPLICATION FOR SIGN & ZONING PERMIT

Application is hereby made on behalf of the owner of premises herein described for a sign and zoning permit under the Zoning Ordinance of 1993 and the following statements of fact and answers to questions are represented as true and correct.

1. Property Map/Tax ID (Required): _____
2. Job Address: _____
3. Name of Listed Property Owner: _____
 - If listed owner is under a fictitious name, proof of ownership is required. You must provide paperwork from the PA Department of State, Bureau of Corporations and Charitable Organizations OR other official governmental agency.
4. Authorized Agent of Property: _____
5. Address of Property Owner: _____
6. Telephone Number of Listed Owner: _____
7. Owner of Sign: _____
8. Address of Sign Owner: _____
9. Contact Number of Sign Owner: _____
10. Has this property/business been vacant for the past (6) months? Yes No
11. Does said business have a current certificate of occupancy on file? Yes No
12. **Class of Sign Work:** (*Circle One*) -New- -Alteration- -Erect- -Relocate-

Other/Explain: _____

13. **Proposed Use of Sign:** (*Circle One*) -Identification- -Business- -Advertising-

If Advertising, will ads include off premise Signs? YES NO

Other/Explain: _____

14. Type of Sign: (Circle One) *Temporary *Projecting *Roof *Marque *Ground
*Awning *Free Standing *Wall *Closed *Portable

Other/Explain: _____

15. Number of Square Feet of Sign: _____

16. Is the Sign Illuminated and/or Digital? YES NO _____

If Yes, Please Provide Name of Electrical Contractor & Permit Number:

****APPLICANT MUST INCLUDE PICTURES/DRAWINGS OF PROPOSED SIGN. ****

****Please Provide Calculations for all Structural Signs Including Wind Loads****

17. Number of Faces: _____

18. Dimensions: _____ by _____

19. Surface Area per Sign Face: _____

20. Top of Sign Above Grade: _____

21. Bottom of Sign Above Grade: _____

22. Total Square Footage of All Existing Signs: _____

23. What Zone is the Sign Located In? _____

24. Is this an "Off Premise" Sign? YES NO

25. Does the Sign Comply with all "Off Premise" Regulations? YES NO N/A

26. Is the Sign Permitted Within Said Zone? YES NO _____

27. Is the Proposed Sign Located within a Historic District? YES NO

28. Will Sign Hang Over City Right of Way: YES NO

If yes, please explain: _____

29. Are there any Existing Signs on the Property? YES NO

If yes, how many? _____

30. Contractor Identification - To be completed by all applicants.

City of Scranton Contractor's License Number _____

Contractor's PA Registration Number _____

Contractors/Business Single Tax Office Account Number _____

Contractor's Business Name _____

Licensed Contractor's Name (Not Business Name) _____

Contactors Address _____

Contractor's Phone Number _____

****If Applicable:*

Architect's Name & Address: _____

Architect's Telephone Number: _____

31. Detailed description of sign work being performed:

32. Total Cost of the Proposed Sign Operation including Labor & Materials:

\$ _____

33. Zoning Information

I. Front Footage of Property: _____

II. The nearest distance of the edge of the property line of the lot will be as follows:

_____ Feet from the Rear Lot Line; _____ Feet from the Left Side Line;

_____ Feet from the Right Side Line; _____ Feet from the Front Lot Line;

***FURTHER, IF ANY OF THE ANSWERS TO QUESTIONS HEREIN OR INFORMATION PROVIDED ARE FALSE OR A MISREPRESENTATION, SHALL VOID THIS PERMIT AND THE SAME WILL BE REVOKED. ***

****NOTE: ALL WORK SHALL COMPLY WITH THE PENNSYLVANIA UNIFORM CONSTRUCTION CODE, ACT 45 OF 1999****

***THIS PERMIT BECOMES NULL AND VOID IF WORK OR CONSTRUCTION AUTHORIZED IS NOT COMMENCED WITHIN 180 DAYS OR IF CONSTRUCTION OR WORK IS SUSPENDED OR ADANDONED FOR A PERIOD OF 180 DAYS AT ANY TIME AFTER WORK IS COMMENCED. ***

I swear or affirm that my statements and answers above are true and complete to the best of my knowledge and belief. I also realize that I will be subject to criminal penalties provided by 18 PA.C.C 4903 and 4904 if I have provided false answers and statements.

Signature of Contractor or Authorized Agent

Date

****ALL LICENSED CONTRACTORS APPLYING FOR A PERMIT MUST SUBMIT A COMPLETE EXECUTED COPY OF THEIR CONTRACT AND INSURANCE FOR THE PROPOSED WORK BEFORE THE PERMIT IS ISSUED. ****

**** NO WORK IS TO BE STARTED UNTIL APPLICANT RECIEVES AN APPROVED PERMIT AND IT IS POSTED AT THE JOB SITE. ****

OFFICIAL USE ONLY

APPROVED: YES

NO

DATE

SIGNATURE OF ZONING OFFICER

APPROVED: YES

NO

DATE

SIGNATURE OF BUILDING CODE OFFICIAL

Comments:

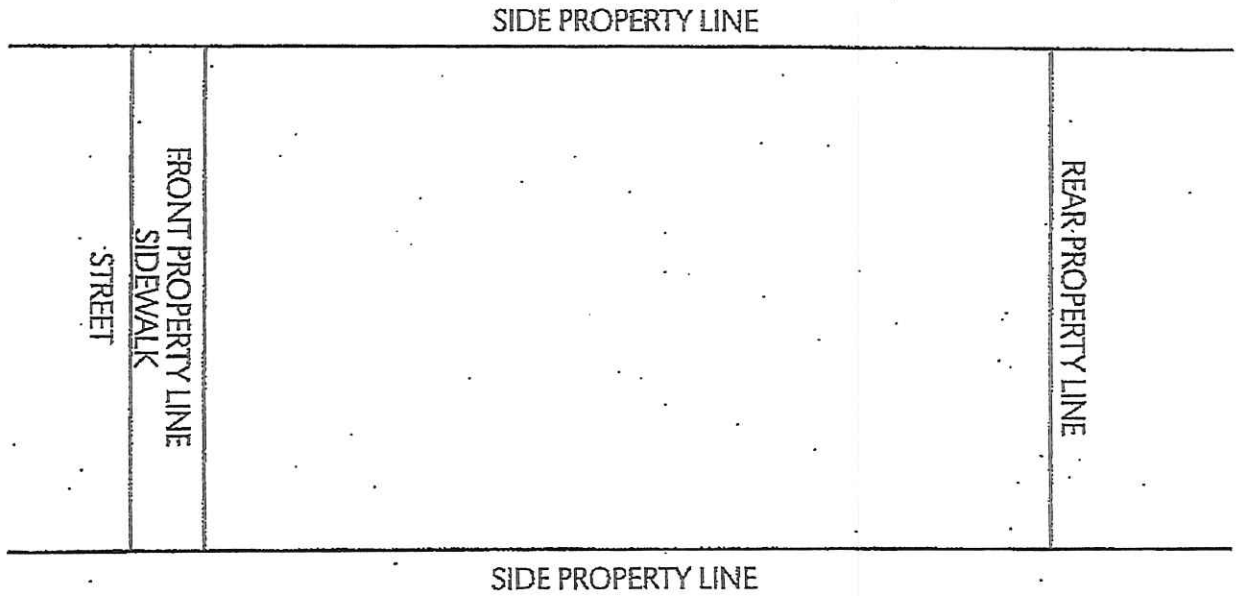


DEPARTMENT OF LICENSING, INSPECTIONS AND PERMITS

CITY HALL • 340 NORTH WASHINGTON AVENUE • SCRANTON, PENNSYLVANIA 18503 • PHONE: 570-348-4193 • FAX: 570-348-4171

Plot Plan

1. This page shall be used for the drawing of a site plan for all major construction and in such other cases as the Building Inspector deems necessary.
2. The site plan shall show the location and size of the lot, locations and sizes of the buildings and structures upon the premises (both existing and proposed) and their relationship to adjoining premises and public roads.
3. Locate and label clearly and distinctly all buildings and structures, show widths and depths of all yards, show names of all roads and indicate north with a north arrow.
4. If the principal building or structure is to be served by an on site sewage disposal system a sketch of the system shall be shown.



Calculations