

Date _____ MUNIS Number _____ Permit Number _____

CITY OF LANCASTER, PENNSYLVANIA

APPLICATION FOR SIGN COMMISSION DESIGN REVIEW OR MODIFICATION

IN ACCORDANCE WITH CHAPTER 255-SIGNS OF THE CODE OF THE CITY OF LANCASTER

Attach completed Application for Sign Permit, with accompanying scaled drawing as per Application form, and note if sign will be illuminated.

APPLICANT

Name: _____
Mailing Address: _____
Telephone: _____ Email: _____

PROPERTY

Address: _____
Owner: _____ Phone Number: _____
Owner's Mailing Address: _____

DESIGN REVIEW IN CB1 AND CB DISTRICTS

Description of Proposed Sign(s) _____

REQUESTED MODIFICATIONS

Sign Ordinance section number(s) applicable to modification request.

Sect. 255-19 ____: Permitted sign size _____ Proposed _____
Sect. 255-19 ____: Permitted total square footage _____ Proposed _____
Sect. 255- ____: Other requested modification(s) _____

I, _____, the undersigned, certify that the information I have provided for this Application for Sign Commission Design Review or Modification is true and correct.

Application fee _____

Applicant Signature Date

Sign Administrator Date