

# MALVERN

*Borough*

## SIGN PERMIT

Date of Application: \_\_\_\_\_ Permit#: \_\_\_\_\_  
Zoning District: \_\_\_\_\_ Building Permit#: \_\_\_\_\_ Parcel #: \_\_\_\_\_  
Use: \_\_\_\_\_

Name & Address of Applicant: \_\_\_\_\_  
Phone#: \_\_\_\_\_ Email Address: \_\_\_\_\_  
Owner of Property: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone#: \_\_\_\_\_ Email Address: \_\_\_\_\_

The following information must be completed:

Location of the sign: \_\_\_\_\_

Method of installation: \_\_\_\_\_

Size of the sign in square feet: \_\_\_\_\_

Single- sided sign: yes \_\_\_\_\_ no \_\_\_\_\_

Double-sided sign: yes \_\_\_\_\_ no \_\_\_\_\_

Plot of Ground-frontage: \_\_\_\_\_ |/f

Plot of Ground-depth: \_\_\_\_\_ |/f

Sketch of information and/or graphics together with the materials of construction for the sign must accompany the application.

*I declare under the penalties of perjury that this application( including any accompanying plans and specifications) has been examined by me and to the best of my knowledge and belief is a true, correct and complete application. All construction must conform to standard engineering practices and applicable Borough of Malvern ordinances.*

Applicant: \_\_\_\_\_ Date: \_\_\_\_\_  
Owner: \_\_\_\_\_ Date: \_\_\_\_\_

FEE: \$ \_\_\_\_\_

Approved: \_\_\_\_\_ Date: \_\_\_\_\_

Disapproved: \_\_\_\_\_ Date: \_\_\_\_\_

Zoning/ Code Enforcement Officer: \_\_\_\_\_  
(signature)

1 E. First Ave  
Phone#: 610-644-2602

Suite 3  
Fax#: 610-644-4504

Malvern, PA 19355  
Email: bwilfong@malvern.org