



SIGN PERMIT

Permit must be submitted to:

Malvern Borough Administration
1 East First Avenue, Suite 3, Malvern, PA 19355
(Mon-Fri; 9:00AM – 12:00PM, 1:00PM – 5:00PM)

OFFICIAL BOROUGH USE	
Amt. Paid \$ _____	Check # _____
Date _____	Permit # _____
Building Permit # _____	

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

I. PROPERTY OWNER INFORMATION

Applicant/Owner Name: _____
First Last

Contact Information: _____
Business Phone Home or Mobile (Circle) Email

Mailing Address: _____
Street City Zip Code

Tax Parcel Number: _____ Zoning District: _____

II. CONTRACTOR INFORMATION

Contractor Name: _____ Company Name: _____
First Last

Contact Information: _____
Business Phone Home or Mobile (Circle) Email

Mailing Address: _____
Street City Zip Code

III. SIGN DETAILS

Sign Location: _____ Sq. Ft. of Sign: _____

Single-Sided: ___ Yes ___ No OR Double-Sided: ___ Yes ___ No

Plot of Ground-Frontage: _____ Plot of Ground-Depth: _____

Installation Method: _____

IV. APPLICANT SIGNATURE

I declare under penalties of perjury that this permit, including any accompanying plans and specifications, has been examined by me and to the best of my knowledge and believe is a true, correct and complete permit.

Applicant Signature: _____ Date: _____