

BEDFORD TOWNSHIP PLANNING COMMISSION

APPLICATION FOR SIGN WAIVER

Name of Applicant Phone (Voice) (Fax)

Applicant Address City/State/ Zip E-Mail Address

Name of Owner Owner Address Phone

Name of Sign Company Company Address

Sign Company Contact Phone (Voice) (Fax)

Name of Business (location where sign is to be placed)

Business Address City/State/ Zip

Current Zoning Parcel Number **\$150.00 fee paid:** yes no

Should the Planning Commission approve the requested, or any portion of the requested, sign waiver, a building permit **MUST** be pulled within **SIX (6) MONTHS** of the date where the Planning Commission approves the minutes of the meeting where the waiver was heard, or the approval shall lapse and cease to be in effect.

Signature of Owner

Signature of Applicant

Type of Building: Choose one of the following

- Stand-Alone (one building with one unit) Multi-Unit (one building with more than one unit)
 Home (for home occupation) Other – explain: _____

If multi-unit, width of unit: _____ Is there more than one building on the site? yes no

Waiver request is for: Wall Sign Monument Sign Window Sign Other
 explain: _____

****NO SIGN WAIVER WILL BE SCHEDULED FOR PLANNING COMMISSION
 CONSIDERATION UNTIL ALL INFORMATION REQUIRED HAS BEEN PROVIDED****

To be completed by Township:

- Plot Plan provided (layout showing location of sign or proposed sign)
- Sign rendering (color preferred) with dimensions provided
- Base rendering (color preferred) with dimensions provided
- Proposed materials and color scheme (if color rendering not provided) provided
- Overall height provided (with sign and base dimensions separately identified)
- Landscaping Plan provided
- Any proposed sign lighting provided (type, location of lights, and illumination plan)

Date request went before the Planning Commission:
