

CITY OF SAINT MARYS ELK COUNTY, PENNSYLVANIA

11 Lafayette Street
PO Box 1994
Saint Marys, PA 15857
(814) 781-1718 x227
(814) 834-1304 FAX
www.cityofstmaryspa.gov

Application #	_____
Date Received	_____
Zoning District	CB _____
Fee	NA _____

BOULEVARD SIGN PERMIT APPLICATION

1. NAME OF ORGANIZATION _____
2. MAILING ADDRESS _____
3. TYPE OF ORGANIZATION _____
(Limited to non-profits, governments, schools, and community organizations)
4. CONTACT PERSON AND TELEPHONE NO. _____
5. EVENT NAME AND DATE. _____
6. SIGN PLACEMENT DURATION (MM/DD/YY THRU MM/DD/YY) _____
(Maximum duration is two consecutive weeks before the event. Signs must be removed within 36 hours of the end of the event or be subject to impoundment, recovery fee, and future permit denial for a period of one (1) year.)
7. SIGN DIMENSIONS (LENGTH x HEIGHT) _____
(Maximum height is 4 feet.)
8. PLACEMENT OF SIGN _____
(Use the provided drawing to indicate placement of sign and setbacks from curb and sidewalk. The minimum setback is the height of the sign.)

SIGNATURE OF APPLICANT _____

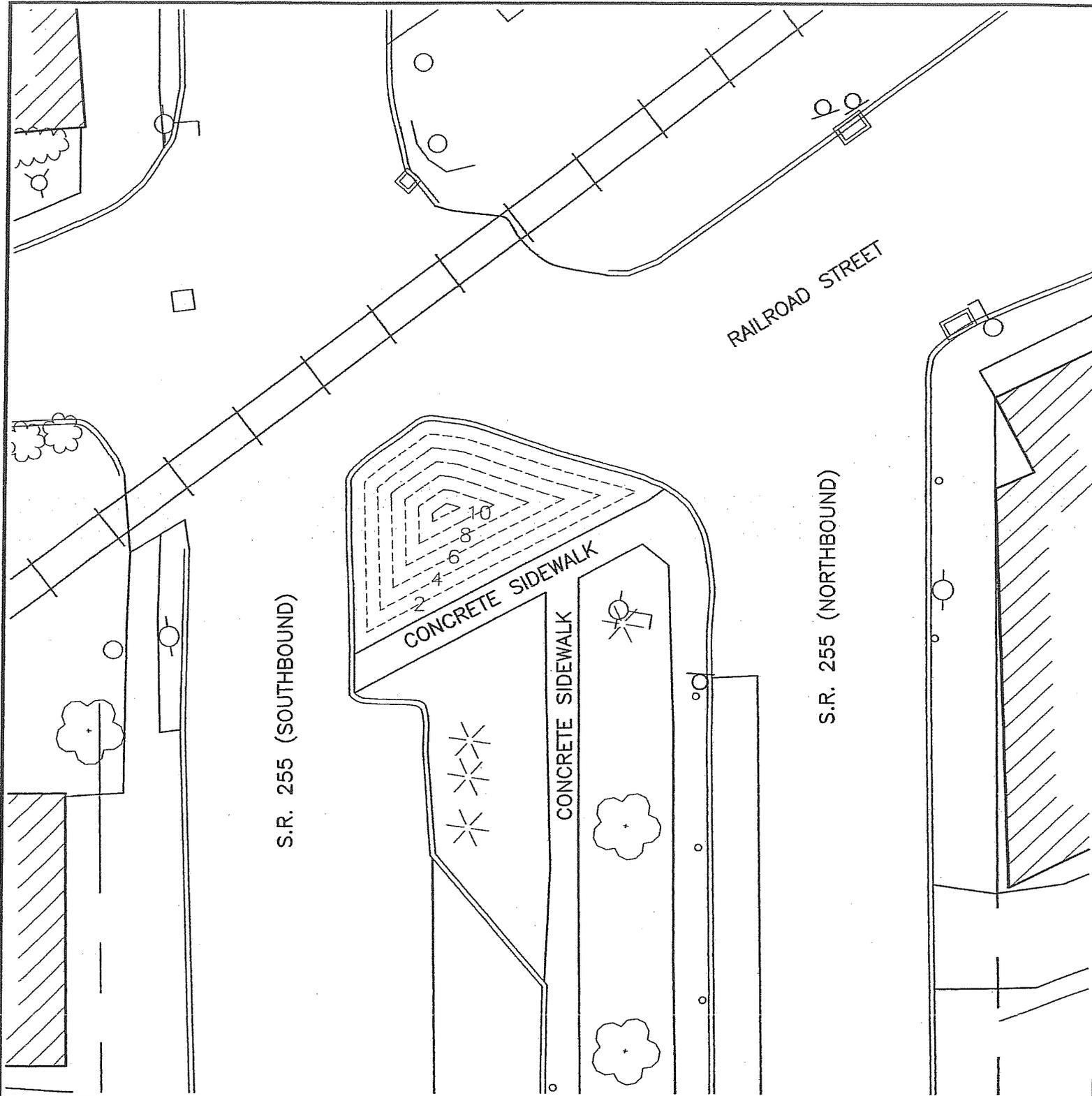
=====

RECOMMENDATION OF ZONING OFFICER

The application of _____ to erect a sign is hereby (approved)
(denied) according to Section 315 _____ of Zoning Ordinance of 2005,
dated December 18, 2006, as amended.

Date

Signature of Zoning Officer



BOULEVARD SIGN PERMIT DIAGRAM



CITY OF ST. MARYS

P.O. Box 1994
 11 LaFayette Street
 St. Marys, Pennsylvania 15857
 Phone: 814-781-1718 Fax: 814-834-1304
www.cityofstmarys.com

SCALE: 1"=20'	JOB #2036
BY: TJB	SHEET 1 OF 1
	DATE: 11/01/10