If returning by mail, please mail to:
Selinsgrove Borough
1 N. High Street
Selinsgrove, PA 17870
Please call (570) 374-2311 for more information

Office Use Only
Date _____
Fee ($50 per sign) _____
Date Paid _____
Parcel Number _____

Application for Sign Permit
Selinsgrove Borough

Name of property or business owner _____

Name of applicant if other than owner _____

Applicant's address _____

Applicant's email address and phone number _____

Address for which permit is being issued _____

Business name _____

Sign Erector _____

Zoning District _____

Number of existing signs on lot as of date of application _____

Number of proposed signs _____

Building frontage (width of front of building) _____

Type of sign(s) to be erected:

a. Wall sign, not projecting from building _____
b. Freestanding sign (see §27-1504 (9)) _____
    a. Height to top of sign _____height from ground to bottom of sign _____
c. Monument Sign (each side counts as a separate sign) _____
d. Window sign (not to exceed 20% of total window area) ____
    a. Total square footage of windows on street facing side of building _____
e. Billboard or outdoor advertising device (Conditional use only) ____
f. Electronic Message Board or LED Signs (Special Exception only) ____
g. Portable Sign ____

Size of sign:

Width _____ Height _____ Total Square Feet of Sign _____

Width _____ Height _____ Total Square Feet of Sign _____

Width _____ Height _____ Total Square Feet of Sign _____

Will the sign(s) be permanent or temporary? _____

If temporary, number of days sign will be in place _____

Distance setback from Borough right of way _____

Type of material used in sign _____

How is sign secured? _____

Is sign illuminated? _____

Does sign obstruct any windows, exits, cartway, or extended over a pedestrian right of way?

_____

Attach an image of the proposed sign(s) <u>with labeled dimensions</u> for review by the Zoning Officer. Applications without an attached image will not be considered for permits.

The undersigned hereby make application to erect sign(s) as specified herein, and does agree that the provisions of the Selinsgrove Borough Code will be complied with, whether specified herein or not.

Applicant's Signature _____ Date

_____

OFFICE USE ONLY

Sign Permit No. _____

Applicant _____

☐ Approved ☐ Disapproved _____

Zoning Officer

LMM – 16 May 2025