



**West Caln Township**  
PO Box 175  
Wagontown, PA 19376  
610.384.5643

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## REQUEST FOR SIGN PERMIT

**Business/Organization Name** \_\_\_\_\_

**Contact Name** \_\_\_\_\_

**Mailing Address** \_\_\_\_\_

**Physical Address of Proposed Sign (If different)** \_\_\_\_\_

**Phone** \_\_\_\_\_

**Indicate One**      \_\_\_ Home Occupation (2sf or less) - \$25.00 fee

                         \_\_\_ Commercial - \$50.00 + \$1.00/sf fee

### Description of Proposed Sign

Location: \_\_\_\_\_

Width: \_\_\_\_\_

Length: \_\_\_\_\_

Sign Name: \_\_\_\_\_

For any sign, a Plot Plan must be furnished that is not larger than 11"x17". Include a border showing the site, roads, location, size, shape, and name(s) of the abutting property owner(s).

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

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*Office Use Only*

Approval: \_\_\_\_\_

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

Fee Paid: \_\_\_\_\_