

COOLBAUGH TOWNSHIP
ZONING OFFICE
5550 MEMORIAL BLVD.
TOBYHANNA, PA. 18466
(570) 894-8490 FAX (579) 894-8413

SIGN PERMIT APPLICATION

Date: _____

Owner / Lessor: _____

Address: _____

_____ Zip Code: _____ Phone Number: _____

Signature _____

Sign Contractor: _____

Address: _____

_____ Zip Code: _____ Phone Number: _____

Signature _____

Location Of Property: Store Number: _____ Lot: _____ Section: _____ Block: _____

Street / Route: _____

Development / Community: _____

Tax Number: _____ Map Number: _____

Height: _____ Sign Dimensions: _____ Sign Type: _____

Site Plan: _____ Illumination: _____

Scaled Elevation Drawing: _____ Signature Of Applicant: _____

Date Of Action: _____ Comments: _____

Granted _____ Denied _____

Fee \$ _____

Recorded: _____

Zoning Officer