

# SIGN PERMIT APPLICATION

MT LEBANON INSPECTION OFFICE  
 710 Washington Road  
 Pittsburgh, PA 15228  
 412-343-3408

**PERMIT #** \_\_\_\_\_

*This section to be completed by the Inspection Office*

Zoning Hearing \_\_\_\_\_ Zoning District \_\_\_\_\_ Allegheny County Parcel # \_\_\_\_\_

**Applications that are completely filled-out & with the required supporting documents will be processed in the order they are received.**

<b>Project Site</b>	Street Address _____ Tenant Business Name _____ Contact Person _____ Phone _____ Email _____
<b>Owner of the Property/ Building</b>	Owner Name _____ Contact Person _____ Phone _____ Email _____
<b>Contractor Information</b>	Contractor Name _____ Address _____ Contact Person _____ Phone _____ Email _____
<b>Nature of Proposed Sign</b>	<input type="checkbox"/> Building Mounted <input type="checkbox"/> Free Standing <input type="checkbox"/> Temporary/Other ( <i>explain</i> ) _____ _____ <input type="checkbox"/> I have attached (2) copies of the drawings and specifications of the proposed sign. <b>Comprehensive Liability Insurance:</b> Will proposed sign abut or overhang any public sidewalk space? <input type="checkbox"/> Yes <input type="checkbox"/> No    If Yes, please complete page two (2) of this application. <b>ESTIMATED COST OF PROJECT \$</b> _____

I hereby agree to be bound by the provisions of the ordinances, specifications, regulations and restrictions as may be imposed by Mt. Lebanon regarding this application. I verify that the statements made in this application are true and correct. I understand that any false statements herein are made subject to the criminal penalties of 18 Pa. C. S. §4904, relating to unsworn falsification to authorities.

Property owner or Representative \_\_\_\_\_ Date \_\_\_\_\_

**THIS SECTION TO BE COMPLETED BY THE INSPECTION OFFICE.** Plans, specifications and survey for the above application have been examined and I hereby certify that they comply in every particular with the Ordinances of Mt. Lebanon, PA and approve the issuing of this permit for the same, after paying the required fee.

**FEE:** \$ \_\_\_\_\_

\_\_\_\_\_  
*Building Inspector's Signature*

\_\_\_\_\_  
*Date Approved*

# **SIGN PERMIT APPLICATION COMPREHENSIVE LIABILITY INSURANCE INFORMATION**

I hereby certify that I have obtained the necessary insurance coverage for the premises involved, additionally insuring indemnifying Mt. Lebanon, Pennsylvania as required by the Mt. Lebanon Building Code, and hereby submit certification with this application:

**Property Address** \_\_\_\_\_

**Insurance Carrier** \_\_\_\_\_

**Carrier Address** \_\_\_\_\_

\_\_\_\_\_

**Policy Number:** \_\_\_\_\_

**Effective Date:** \_\_\_\_\_

**Expiration Date:** \_\_\_\_\_

*I further certify and agree that at the expiration date of the present policy, I will renew same or obtain required coverage for the life of the sign(s)*

\_\_\_\_\_  
*Insured Signature*

\_\_\_\_\_  
*Date of Application*

\_\_\_\_\_  
*Print Insured Name*