

# SOUTH WHITEHALL TOWNSHIP

## NEW SIGN REQUEST APPLICATION

All applications for signs must be made to the Traffic Superintendent.

Fax Number: 610-398-6898

Office Number: 610-398-0407

**\*\*\*\*\*All street signs must be approved by traffic department\*\*\*\*\***

Applicant Name: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_-

Phone Number: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Applicant Address: \_\_\_\_\_

Location of Request: \_\_\_\_\_

Nearest Cross Street: \_\_\_\_\_

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

Reason for Request: \_\_\_\_\_

Is this Private Property:                      Yes       No

Is this a Township Street:                      Yes       No

Is this a PennDOT street:                      Yes       No

### SIGN REQUEST:

Watch Children:                      Yes       No       How many \_\_\_\_\_

Deaf Child:                      Yes       No       How many \_\_\_\_\_

Speed: 25 35 45 55                      Yes       No       How many \_\_\_\_\_

No parking:                      Yes       No       How many \_\_\_\_\_

Arrow signs needed:                      Yes       No       How many \_\_\_\_\_

I. D.:                      Yes       No       How many \_\_\_\_\_

Stop:                      Yes       No       How many \_\_\_\_\_

Handicap:                      Yes       No       How many \_\_\_\_\_

If requesting Handicap Sign, please give the State Permit # of the Handicap Car Tag: \_\_\_\_\_

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### *Public Works Department Use Only* \_\_\_\_\_

Approved by: \_\_\_\_\_ Date: \_\_\_\_\_

Date Received: \_\_\_\_\_ Date Issued: \_\_\_\_\_

Expiration Date: \_\_\_\_\_ Permit #: \_\_\_\_\_ - \_\_\_\_\_