

# PENNSYLVANIA TOURISM SIGNING TRUST 2300 Vartan Way, Suite 275, Harrisburg, PA 17110

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## **Logo Signing Program: FOOD APPLICATION**

Submit the \$500.00 Application Fee payable to PA Tourism Signing Trust Application Fee is non-refundable, and does not apply to the Participation Fee Participation Fees are published at <a href="https://www.palogo.org">www.palogo.org</a>

All sections of the <u>Application must be completed</u>, and the <u>Application Fee</u> paid, in order for the <u>Application to be valid</u>

Use page 1 of the Application for proof of the mandatory Application Fee

This application expires sixty (60) days from the date of issuance of the Trust's written decision on the application

No.:		No.:		Name:	
	(i.e., I-xx; US xx; PA xx)	•	(i.e., 123)	_	(i.e., destination on green & white guide signs)

Section 1: Definitions

Section 2: Owner Information
Section 3: Location Information

Section 4: Eligibility/Compliance Information

#### **SECTION 1: DEFINITIONS**

<u>OWNER</u>: The individual or legal entity that has legal title to the rights and privileges under the logo signing agreement. (This is not the tradename nor a management company; but rather the entity that has the financial and operational interest in the property using the logo sign.) The **OWNER** is the entity that will be designated as the **Participant** under the PA Logo Signing Agreement. (For example: XYZ Services, Inc.)

**TRADENAME:** The trade or fictious name under which the **OWNER** does business at this location. (For example: "McDonalds", "KOA Campground", "Holiday Inn", "Amoco")

## **SECTION 2: OWNER INFORMATION**

		S:							
				ZIP:					
				FAX:					
FEDERAL EIN #:         CONTACT NAME:           EMAIL:									
LIVI	٦١L								
ow	NER i	is (check one and complete information	tion for same)						
A.		Sole Proprietorship (Name)							
В.		Husband & Wife (Names)							
C.		General Partnership (Names of all General Partners)							
D.		Corporation (Date & State Incorporated)							
E.		Limited Partnership (Names of Ger							
F.		Limited Liability Company Name of Manager:							
		If no Manager, names of all members having greater than 10% interest							
G.		Registered Limited Liability Partnership (Names of partners having greater than 10% interest)							
G.									
Н.		Trust (Name of Trust)							
•••		Trust (Name of Trust) (Names of Beneficiaries)							
Nar	nes 8	& titles of representatives authorized Name	d to execute docume	ents on behalf of <b>OWNER</b> Title					
BILL	ING I	NAME & ADDRESS: (if different than O	WNER name & addres	s)					
PHC	ONE:_	FAX:	CONTACT	Γ NAME:					
EM	AIL:								

### **SECTION 3: LOCATION INFORMATION**

TRADENAME AT LOCATION:									
ADDRESS:									
CITY:		STATE:	ZIP:						
PHONE:			FAX:						
CONTACT NAME:		EMAIL:							
The Deed citation for the real e	state upon whicl	n <b>OWNER'S</b> busine	ess is situated is:						
County:	County: Instrument Number:								
Deed Book Volume Nu	Page Number:								
Name of Entity in which	Name of Entity in which Property is titled:								
Legal Relationship of Enti	Legal Relationship of Entity in which property is titled to OWNER (if Entity and Owner are different):								
If Leased, Expiration da	If Leased, Expiration date of lease:								
If facility is under construction, please provide the following information:									
Dat	e of groundbre	aking	Schedule	d Opening Date					
	SECTION 4: C	OMPLIANCE INF	<u>ORMATION</u>						
The business identified in <b>Se</b> 2.14 <u>Types of Services</u> (Page end of the nearest exit ramp accessible without admission and provides:	2-76), including of the subject	Sub-Section (b)	<u>Food</u> , is located censed by the Departme	_ miles from the ent of Agriculture,					
Indoor seating for at leas	t 20 people	public restroon	ns with sinks & running v	water					
Business hours are:									
M TU	W	TH F_	SAT	SUN					
Subject to the penalties provaforegoing answers and stat knowledge and belief.	•	•	•						
	Signature			_					
	 Title			_					
	Date								