

Sign Permit Application

Job Address:								
			Owner I	nformation				
Owner Name:								
Address:		City		State:	Zini			
Address.		City:		State.	Zip:			
Phone Number:								
			O a urbura a ta		-			
Contractor Name			Contracto	r Informatio	n			
Address: City:			State: Zip:					
				F				
Phone Number:			Email:					
			Sign In	formation				
Date Applied:			Expected Installation Date:					
		,						
Type of Sign (check)			Is the Sign:		New	Replacement		
Billboard	Marquee	Roof	Surface Area	:	Sign Length:	Sign Width	1:	
Canopy	Monument	Temporary						
Combination	Pennant	Wall	Wall Area: (If a	ttached)	Wall Length:	Wall Heigh	nt:	
Flash	Portable	Lighted	_					
Freestanding	Projecting	Other	Street Fronta	ge: (in feet)				
If Other: Define H								
Number of Existir	igns on Site:	Total Area of	Total Area of Existing Freestanding Signs on Site:					
	A				in de la contra e a lle d'un			
	Арю				ired, showing all dim wind load data.	iensions.		
	Sign Material				Location Infor	mation		
Face:		Clearance Ab	Clearance Above Sidewalk:					
Frame:		Projection fro	Projection from Building:					
Supports: Zoning District:								
Site Plan						Per	mit Fee	
						Under 40 So	q. Ft. \$5	
40 to 100 S Over 100 S Fee is double							q. Ft. \$10	
							q. Ft. \$25	
							Fee is double if installed	
						Before permit	Before permit is granted	
						-	Cash or Check Number:	
		d all other signs, Ic	t lines, buildings,	streets, etc.	Include dimensions.			
Use back if neces	ssary.	-	-					
				Approved	by:		Date:	
				Permit Nu	mbor:			
Signature of Appl	licant		Date					

No refund will be issued once permit is issued.