



Sign Permit Application

Job Address:										
Owner Information										
Owner Name:										
Address: City:						State:	Zip:			
Phone Number:										
Contractor Information										
Contractor Nan	ne:									
Address: City:						Zip:	Zip:			
Phone Number:					Email:					
Sign Information										
Date Applied:					Expected Installation Date:					
Type of Sign (check)					Is the Sign:		New	Repl	lacement	
Billboard		Marquee	Roof		Surface Area:		Sign Length:		Sign Width:	
Canopy		Monument	Temporary							
Combination		Pennant	Wall		Wall Area: (If at	tached)	Wall Length:		Wall Height:	
Flash		Portable	Lighted			(1, 6, 1)				
Freestanding Projecting Other				Street Frontage: (in feet)						
If Other: Define Here										
Number of Existing Freestanding Signs on Site:					Total Area of Existing Freestanding Signs on Site:					
A picture of illustration of proposed sign is required, showing all dimensions. If applicable, please provide design wind load data.										
		Sign Material			Location Information					
Face:					Clearance Above Sidewalk:					
Frame:					Projection from Building:					
Supports:					Zoning District:					
Site Plan								Permi	t Fee	
									Under 40 Sq.	
								40 to 100 Sq.	Ft. \$10	
							Over 100 Sq. Ft. \$25			
								Fee	e is double if	installed
				Before p			fore permit is	granted		
								Cas	sh or Check N	umber:
Show Location of sign plus any and all other signs, lot lines, buildings, streets, etc. Include dimensions. Use back if necessary.										
·						Approved I	by:	ı		Date:
						Permit Nur	nher			
Signature of Ap	oila	cant			Date	. Omini riul	iiiot.			