



**SIGN PERMIT APPLICATION**

All Sign Permit Applications are reviewed on **Wednesday's ONLY**

(If received on a Wednesday the application will be reviewed on the Following Wednesday)

**BUSINESS INFORMATION:**

BUSINESS NAME \_\_\_\_\_  
 BUSINESS ADDRESS \_\_\_\_\_  
 CONTACT PERSON \_\_\_\_\_ PHONE # \_\_\_\_\_  
 BUILDING/UNIT SIZE (SQFT) (WALL SIGNS ONLY)      WIDTH OF FACADE TO RECEIVE SIGNAGE (WALL SIGNS ONLY)  
 \_\_\_\_\_

**SIGN CONTRACTOR INFORMATION:**

SIGN CONTRACTOR/DESIGNER      CONTACT PERSON      PHONE #  
 \_\_\_\_\_  
 ADDRESS      CITY, STATE, ZIP      E-MAIL  
 \_\_\_\_\_

**ELECTRICAL CONTRACTOR INFORMATION:**

BUSINESS NAME      CONTACT PERSON      PHONE #  
 \_\_\_\_\_  
 ADDRESS      CITY, STATE, ZIP      E-MAIL  
 \_\_\_\_\_

**TYPE OF SIGNAGE:**

WALL SIGNS      FREE STANDING SIGNS      ILLUMINATION      \_\_\_ None      \_\_\_ LED  
 Height: \_\_\_\_\_ Ft.      Sign Height: \_\_\_\_\_ Ft. above ground      \_\_\_ Neon      \_\_\_ Indirect  
 Width: \_\_\_\_\_ Ft.      REFACE SIGNAGE: \_\_\_\_\_      \_\_\_ Fluorescent      \_\_\_ Other

ELECTRONIC SIGN \_\_\_\_\_ Ft.

WINDOW Size \_\_\_\_\_ Ft.      AWNING Size \_\_\_\_\_ Ft.      CANOPY Size \_\_\_\_\_ Ft.

PROJECTING SIGNS Clearance above walkway or driveway: \_\_\_\_\_ Ft.

Projection distance from building: \_\_\_\_\_ Ft.

DISTANCE FROM ROW: \_\_\_\_\_

**Note-Upon APPROVAL: PERMIT FEES**

Each NEW Sign Permit = \$35

Each Sign Face Change = \$10

Estimated Cost/Value of Project: \$ \_\_\_\_\_

Permit Fees: \_\_\_\_\_

**FINAL SCOPE OF WORK:**

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**OFFICE USE ONLY:**

Date Received: \_\_\_\_\_ By: \_\_\_\_\_  
 Approval Date: \_\_\_\_\_ By: \_\_\_\_\_

**NOTE:** All applications must be accompanied by a site plan, existing signage with dimensions, and proposed new signage with dimensions to process. Building & Zoning Office #815-632-6624.