

Permit # PRSGN _____ - _____

SIGN PERMIT APPLICATION

Project Business Name: _____

Project Address/Location: _____

Applicant: _____

Applicant's Address: _____

Applicant's Phone & Fax #: _____

Applicant's Email Address: _____

Type of Sign: Check only one

- | | |
|--|---|
| <input type="checkbox"/> Wall Sign (\$100) | <input type="checkbox"/> Monument/Detached Sign (\$100) |
| <input type="checkbox"/> Temporary Sign (\$50) | <input type="checkbox"/> Directional Sign (\$50) |

Illumination: Specify whether the sign is illuminated

- | | |
|--|--|
| <input type="checkbox"/> Illuminated * | <input type="checkbox"/> Non-Illuminated |
|--|--|

***NOTE:** IF BRANCH CIRCUIT IS NOT CURRENTLY AVAILABLE FOR ILLUMINATED SIGN, A LICENSED ELECTRICAL CONTRACTOR MUST OBTAIN ELECTRICAL PERMIT PRIOR TO INSTALLATION. ALL SIGNS INVOLVING INTERNAL LIGHTS OR OTHER ELECTRICAL DEVICES OR CIRCUITS SHALL DISPLAY A LABEL CERTIFYING IT AS BEING APPROVED BY THE UNDERWRITER'S LABORATORIES, INC.

Sign Dimensions and Setbacks for Wall and Monument/Detached Signs

Height of sign: _____ ft (X) Width of sign: _____ ft (=) Area of sign: _____ sq ft

Area of building façade/wall: _____ sq ft Total height of detached sign: _____ ft

Setbacks: front property line: _____ ft rear property line: _____ ft

side property line: _____ ft side property line: _____ ft

The applicant understands that this permit is issued only for work described here in and included in **accompanying plans and specifications**. All rights and privileges acquired under the provisions of this Ordinance, or any application thereto, are merely licenses revocable at any time by the Director of Planning and Codes.

Signature of Applicant

Date

For City use only, do not write below this line.

Electrical Permit Required:
 N/A Yes No

Zoning: _____ Permit Fee: _____

Receipt #: _____

Signature of Codes Administration Plans Examiner

Approved: _____
 Planning and Codes Administration Date

Remarks:

Project Address