

## TOWN OF WEST JEFFERSON - SIGN PERMIT APPLICATION

Name of Applicant: \_\_\_\_\_

Name of Business: \_\_\_\_\_

Street Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone Number: (\_\_\_\_) - \_\_\_\_\_ - \_\_\_\_\_

Fax Number: (\_\_\_\_) - \_\_\_\_\_ - \_\_\_\_\_ Email Address: \_\_\_\_\_

Where will signage be placed? *If more than one location, list all locations. (i.e. awning, window/door, etc.):*

\_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_.

Proposed Size of Signage- *If more than one sign, list size of each sign. (ex. 12 sq. feet, 6' x 4', etc.):*

\_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_.

***On a separate sheet, please provide a sketch of the proposed sign(s) for review.***

If a sign company/contractor is being used for sign production, please list their contact information below.

Name of Sign Company/Contractor: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Phone Number: (\_\_\_\_) - \_\_\_\_\_ - \_\_\_\_\_ Fax Number: (\_\_\_\_) - \_\_\_\_\_ - \_\_\_\_\_

Email Address (if applicable): \_\_\_\_\_

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

*By signing above you agree to comply with the Zoning District's sign regulations that are applicable and understand aforementioned regulations that pertain to the district.*

### Office Use Only

Parcel #: \_\_\_\_\_ Currently Zoned: \_\_\_\_\_ Location of Property: In-Town \_\_\_\_ ETJ \_\_\_\_

Physical Use of Property: \_\_\_\_\_

Sign Permit Approval (do sign(s) submitted conform to the Town sign ordinances):    Approved    |    Disapproved

Reason for Disapproval: \_\_\_\_\_

Zoning Enforcement Officer's signature: \_\_\_\_\_ Date: \_\_\_\_\_