



**SIGN
PERMIT APPLICATION**

APPLICATION NO. _____ APPROVED BY: _____ DATE: _____

(BELOW TO BE FILLED IN BY APPLICANT)

Applicant: _____ Phone No.: _____

Address: _____ Zip: _____

Location of Proposed Sign: _____ Zoning District: _____

Structural Type: _____ Functional Type: _____

Circle Type: Awning, Ground, Pole, Wall, Projecting, Canopy Advertising, Business,
Construction, ID

Type of Material to Be Used for Construction:

Height of Sign: _____ Gross Area: _____ Estimated Cost: _____

I certify that I am the (circle one) (OWNER, LESSEE, or TENTANT) of the property for which this certificate is desired. I understand that I must submit plans, information, sketch and the required **fee of \$25.00**, as required before the application will be accepted for consideration. I also understand that my application must be acted upon within 30 days, unless I consent to an extension of time.

A zoning certificate shall become null and void six (6) months after the date on which it is issued unless such six-month period construction has commenced.

Signature of Applicant: _____

SITE SKETCH AND DIAGRAM OR PICTURE OF SIGN NEEDS TO BE ATTACHED WITH APPLICATION.

***Call before you dig: 1-800-344-7233 (Dig Safe)*

SITE SKETCH

