

Zone _____ Building Official _____ Permit # _____

Applicant Not To Fill In Spaces Above This Line

APPLICATION FOR PERMIT TO ERECT A SIGN

Date: _____

Applicant Information:

Name: _____

Address: _____

Telephone Number: _____

Email Address: _____

Location:

Name of Business: _____

Address of Business: _____

Property Owner: _____

Property Owner Address: _____

Zoning District: _____ Parcel ID: _____

Distance of Sign From: Street Line _____ Left Lot Line _____

Right Lot Line _____ Rear Lot Line _____

Sign Information:

Type of Sign: Temporary Ground Wall Projecting Other _____

Size: Length _____ Width _____ Height _____ Projection _____

Location of Sign: _____

Description of Sign: _____

Illuminated, Flashing or Moving: Y / N Explain: _____

Cost of Sign: _____

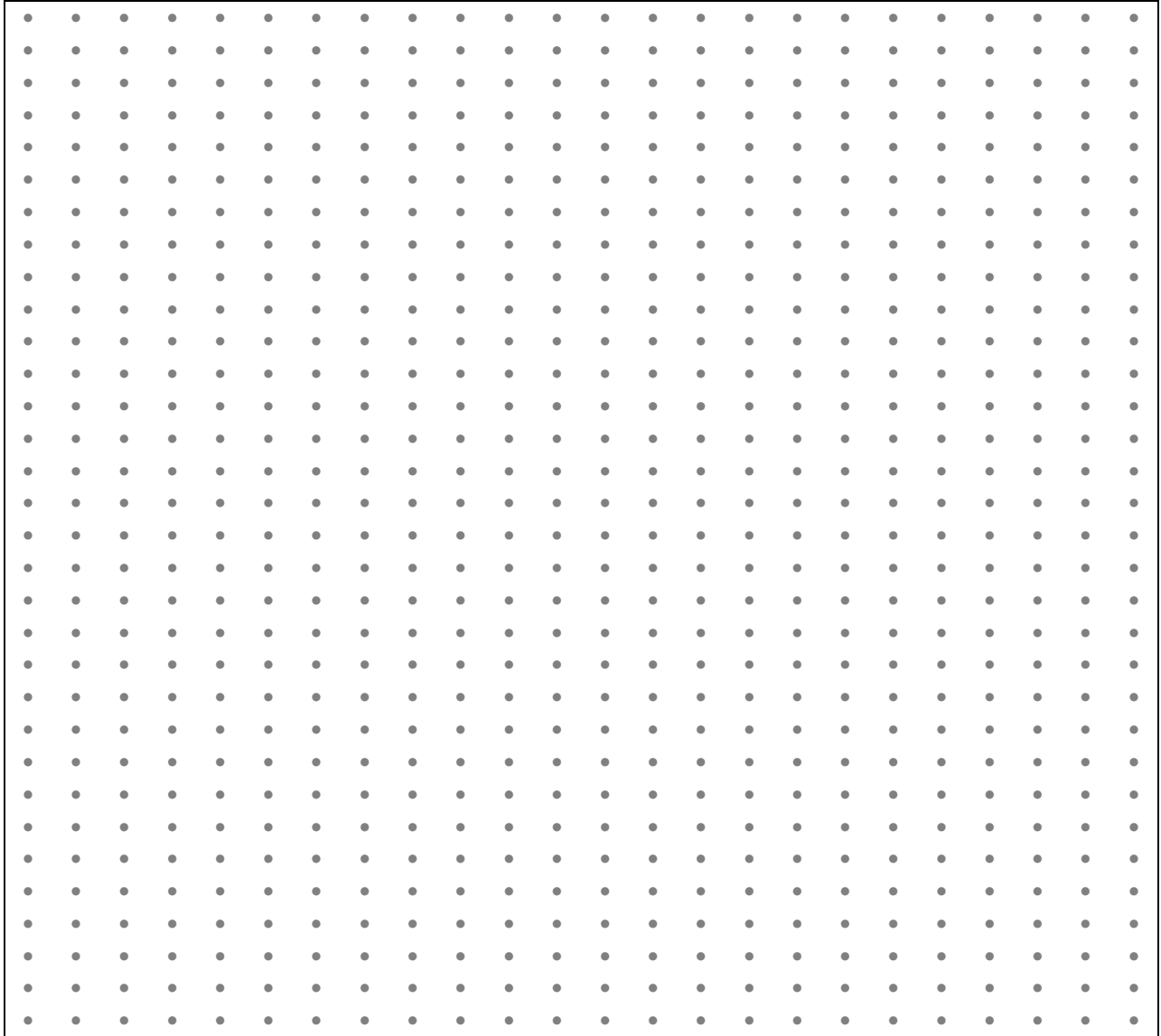
Applicants Signature _____ Date _____

Property Owner Signature _____ Date _____

PLOT PLAN ON NEXT PAGE NEEDED WITH APPLICATION

Plot Plan

Show all structures on lot existing or proposed



Front Property Line

Please indicate setbacks for all proposed work