



SIGN PERMIT APPLICATION

1. PROPERTY INFORMATION

Municipality: _____ Parcel ID: _____

Site Address: _____

2. APPLICANT

Name: _____ Phone: _____ Email: _____

Address: _____ City: _____ State: _____ Zip: _____

3. PROPERTY OWNER

Name: _____ Phone: _____ Email: _____

Address: _____ City: _____ State: _____ Zip: _____

4. INSTALLER / CONTRACTOR

Name: _____ Phone: _____ Email: _____

Address: _____ City: _____ State: _____ Zip: _____

5. APPLICATION FOR: (Check all that apply)

- Checkboxes for New Ground Sign, New Wall Sign, Monolithic Sign, Ground Sign Alteration, Wall Sign Alteration, Pole Sign, Roof Sign, Awning / Canopy Sign, and Other.

Type of Illumination: Internal External LED Other:

Estimated Cost of Construction: _____ Total Square Footage: _____

ATTACH THE ADDITIONAL INFORMATION LISTED BELOW FOR YOUR PROJECT.

- Requirements for Zoning Permit, Site plan, Building elevations, Proof of valid Workers Compensation, and 2 sets of scaled drawings.

I certify that I am the owner of the property or an authorized agent of the owner for which this application has been filed. I hereby certify that all statements contained above are, to the best of my knowledge, true and correct.

Applicants Signature: _____ Date: _____

Received by: _____ Date: _____ Plan Review No. _____

Permit No. _____