APPLICATION FOR SIGN PERMIT

A. Type of Sign Permit	F. Office Head Only
Type:	For Office Use Only Sign A/P #
Permanent Sign	Sign Tag#
→ Fermanent Sign	Electrical A/P#
Limited Duration Sign	Sign Permit Fee:
	Date:
B. Location of Sign	
Address:	
Lot Block	Parcel
If a limited duration sign is located within the public right	of way, provide block number of street
C. Applicant Information	
Name of Applicant	Phone#
AddressC	ity State Zip
Contact Person	Phone#
Sign Installer	License #
Address	
	State Zip Code
D. Permanent Sign Information	<u> </u>
On Building Wall Freestanding	Canopy
☐ Illuminated ☐ Non-illuminated	
Sign Message	
Dimensions: Sign Area square feet	
Lengthftinches Widthft	_inches Heightftinches
E. Limited Duration Sign Information	
LOCATION: TIME OF D	ISPLAY:
_ , _	ends Only
	or Time Period
	Time Period
Sign Message	
Sign Dimensions:LengthWidth	Height
F: To Be Read by the Applicant	l'allanda di s
Any information that the applicant has set forth in t	
may result in the rejection of this application. A con	
the proposed construction will comply at all times w	
government agencies. I hereby declare and affirm, u	
and facts set forth in this sign permit application are	true and correct to the best of my
knowledge, information and belief.	
Applicant's Signature Date	Print Name

AUTHORIZED AGENT AFFIDAVIT:		•		
I hereby declare and affirm, under the pena	Ity of perjury, that:	•		
1. I am duly authorized to make this permit application on behalf of:				
Print Property Owner's Name		Phone		
2. The work proposed by this sign permit ap	nlication is authorize	od by other managements of the		
3. All matters and facts set forth in this Affid knowledge, information and belief.	avit are true and cor	rect to the best of my		
Original Authorized Agent's Signature	Date	Print Name		
☐ APPROVED				
APPROVED	Ŭ DE	NIED		
ZONING INSPECTOR'S SIGNATURE		DATE		