



## Permanent Sign Application

Permit Number: \_\_\_\_\_

Application Fee: \$25

Sign Location	Sign Contractor
Business Name: _____	Business Name: _____
Property Address: _____ _____	Contact Name: _____
Contact Name: _____	Mailing Address: _____ _____
Mailing Address: _____ _____	Phone Number: _____
Phone Number: _____	Email Address: _____
Email Address: _____	<p style="text-align: center;">Property Owner/Landlord (if different from business owner)</p> Name: _____
	Mailing Address: _____ _____
	Phone Number: _____
	Email Address: _____

Signs Attached to the Building						
Wall or Projecting	Area of Wall	Distance Between Sign & Ground Level	Illuminated?	Zoning District	New Building?	Replacing Existing sign from Previous business?

Freestanding Signs						
Total Square Footage of Signs	Height of Sign above ground	Length of Street Frontage of the Lot	Illuminated?	Zoning District	New Building?	Replacing Existing sign from Previous business?

The applicant must submit the following with the application:

- 1) A professional sketch or rendering of the propose sign. No handrawn drawings will be accepted
- 2) A color sample of all colors to be used

Staff will consider applications incomplete without a complete application form, color samples, and rendering on proposed signs. Staff has seven days to review the application. A business license must be obtained by sign contactor before approval will be given.

I do hereby certify:

The information shown on the application is correct.  
 The signage shall be completed with the requirements of the City’s sign regulations.  
 All signs and support shall be kept in good repair and perpetually maintained in a safe condition.

\_\_\_\_\_  
 Property Owner/Business Owner Signature

\_\_\_\_\_  
 Property Owner/Business Owner Printed Name

\_\_\_\_\_  
 Sign Contractor Signature

\_\_\_\_\_  
 Sign Contractor Printed Name

Office Use Only	
Zoning District:	Date Fee Paid:
Approved ____ Denied : ____	Approval Letter Date
Zoning Administrator’s Signature:	