



Application Received By: _____
Fee Paid: _____ Receipt No. _____
Date Application Received: _____

Permit Number: _____

AUTHORIZATION TO ISSUE SIGN PERMIT

Name/Address of Applicant:

Contractor/Address/Phone:

Sign:

Location: _____

Zone: _____

Sign Type:

Free-Standing _____

Wall-Mount _____

Awning _____

Off premises _____

Note: No rooftop, temporary or portable (not covered by "signs exempt" from regulations section 403.2 of the Zoning Ordinance) signs shall be allowed.

Set-back Requirements:

Front Yard: _____

Side Yard: _____

Will this sign be illuminated? Yes _____ **No** _____

If so, describe manner of illumination:

Please attach a plot plan with this application indicating building location and dimensions, sign location and set-backs.

Applicants Signature: _____

Approved: _____ **Disapproved:** _____

Zoning Administrators Signature: _____