



SIGN PERMIT WORKSHEET

APPLICATION DATE _____

ADDRESS: _____

DESCRIPTION OF WORK: _____

LOT # _____ ZONING: _____ MAP # _____ PARCEL # _____

OWNERS NAME: _____ PHONE # (_____) _____ - _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

OCCUPANCY TYPE: _____ TYPE OF CONSTRUCTION: _____ SIGN VALUE: \$ _____

PROPOSED USE OF THE BUILDING/SPACE _____

PROPERTY FRONTAGE: _____ SQUARE FEET OF FACE OF BUILDING: _____

GROUND MOUNTED SIGNS

<u>PRIMARY SIGN:</u>	<u>PROPERTY FRONTAGE</u>	<u>SIDE SETBACK REQ.</u>	<u>ALLOWABLE SQ. FT.</u>
	LESS THAN 50'	10 FEET	24 SQ FT
	50' - 99'	10 FEET	32 SQ FT
	100' - 199'	20 FEET	64 SQ FT
	200' - 299'	50 FEET	72 SQ FT
	300' +	50 FEET	96 SQ FT
SECONDARY SIGN:			24 SQ FT

MAXIMUM HEIGHT OF GROUND MOUNTED SIGN: _____

PRIMARY GROUND SIGN THIS SITE _____ X _____ = _____ TOTAL SQ FT	SECONDARY GROUND MOUNT SIGN _____ X _____ = _____ TOTAL SQ FT
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WALL MOUNTED SIGNS

SINGLE OCCUPANCY:
 PRIMARY SIGN: = 2 SIGNS NOT TO EXCEED 20% OF THE FACE OF THE BUILDING OR 200 SQ. FT.
 SECONDARY WALL SIGN NOT TO EXCEED 50 SQ. FT.
 MULTIPLE OCCUPANCY:
 2 SIGNS NOT TO EXCEED 10 % OF THE FACE OF THE BUILDING OR 100 SQ. FT.
 SECONDARY SIGN = 24 SQ. FT.

PRIMARY WALL MOUNT SIGN _____ X _____ = _____ TOTAL SQ FT	SECONDARY WALL MOUNT SIGN _____ X _____ = _____ TOTAL SQ FT
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IS THE SIGN ILLUMINATED? YES: _____ NO: _____

TYPE OF ILLUMINATION: _____ ELECTRICAL PERMIT? Y: _____ N: _____

Contractor Name : _____ License # _____
 Address: _____
 City, State, Zip _____

APPLICANT SIGNATURE: _____

PLANNING APPROVAL: _____ BUILDING APPROVAL: _____