SIGN PERMIT

Date: _____ Permit Number: _____

Name of Applicant: _____

Location of Store/Retail Establishment: _____

Address: _____

Phone: _____

Building Owner: _____

Address: _____

Phone: _____

Location of Proposed Sign: _____

Type of Sign: _____Ground or Detached _____Wall _____Billboard

Illuminated: _____ Yes _____ No

Colors to be Used: _____

Lettering Size to be Used: _____

Advertising Content: Draw sketch of proposed sing including wording on the reverse side of this application and provide the dimensions of the building wall where the sign will be located:

Approved: _____ Date: _____
Building Inspector