

Sign Permit Application



Permit #: SIGN _____ - _____
Date received: _____
Staff initials: _____

Property Information:

Address: _____ PID #: _____ Zoning: _____

Use of Property: _____

Proposed Sign Information:

Sign Type (permanent) (see Art. 17.7 of UDO for definitions):

- ☐ Projecting from building
- ☐ Flat/wall
- ☐ Window
- ☐ Directional
- ☐ Awning

- ☐ Canopy
- ☐ Monument
- ☐ Pole
- ☐ Directory

Sign Type (temporary):

- ☐ Sandwich
- ☐ Banner
- ☐ Special event
- ☐ Other (specify) _____

Illumination (check all that apply):

- ☐ Internally Illuminated
- ☐ Externally Illuminated
- ☐ Changeable copy/LED
- ☐ Non-illuminated

Contact Information:

Property Owner

Applicant

Name: _____

Mailing address: _____

Phone number: _____

E-mail address: _____

Applicant relationship to property owner: _____

Contractor information (fabricator/installer):

Name: _____ Business: _____

Mailing address: _____ Phone: _____

E-mail: _____

Additional information required:

A completed application shall contain the following information and documentation:

- A sketch or diagram of the proposed sign, indicating its dimensions (height and width) in inches and feet, in addition to the sign's height from adjoining ground grade for pole or monument signs.
- An appropriate scale drawing or rendering of the proposed sign indicating material to be used on face, frame, and support structure, exact text wording (including illustrations and logos) and size of lettering.
- For building-mounted signs, an illustration of the building's façade showing the sign's proposed placement on the building and the dimensions of the façade upon which the sign is proposed to be placed..
- For free-standing signs, a property sketch plan showing the placement of buildings as well as location of the proposed sign.

Owner/Applicant Statement

I/we hereby certify that all information in this application and attached thereto is accurate and complete. I/we certify that work will comply with all applicable state and local laws, ordinances and regulations. I/we certify that all construction will conform to plans and specifications submitted and as approved by the Town of Marshville. I/we understand and agree that any changes to approved plans must be submitted to Town of Marshville prior to commencement of construction.

Owner Name (print)

Signature

Date

Applicant Name (print)

Signature

Date

** Office Use Only **

As Planning & Zoning Administrator I believe this application to be complete based on the certification of the owner(s)/applicant(s) and with my signature below accept the application and any corresponding documentation.

Signature, Planning & Zoning Administrator

Date

Application Status:

- ☐ Approved
- ☐ Denied