Community Development Department
5047 Union Street~ Union City, GA 30291
Phone (770) 515-7920 *Fax (770) 964-8795
www.unioncityga.gov

Sign Permit Application

Instruction: ***Please complete the following form and allow two working days for the certification to be prepared. The fee for a sign permit is dependent on the request and must be submitted with your request. Please be sure to include the following:***

- ***Site plan of the property depicting where proposed sign is located, including setback from public right of way and all existing signs on site.***
- ***Illustration of sign showing height, width, area, height above grade, materials and lettering.***

Upload your completed form to:
https://unioncityga.portal.iworq.net/portalhome/unioncityga
Please make your payment online when submitting your application.
https://unioncityga.governmentwindow.com/payer_login.html

Application is for a sign in: ☐ **Residential Area** ☐ **Non- Residential Area**

Name of Development/ Business: _____

Applicant Name: _____

Location Address: _____

Tax Identification/ Parcel #: _____

The Sign is intended to be: ☐ **Permanent** ☐ **Temporary**

If Temporary, Erection Date: _____ **End Date:** _____

Type of Sign (Bolded categories are Non-Residential only):

☐ **Attention Getting Device**	☐ **Banner**	☐ **Light Pole Banners**
☐ **Canopy**	☐ **Freestanding**	☐ **Billboard**
☐ **Flag**	☐ **Mural**	☐ **Suspended**
☐ **Marquee**	☐ **Rear Entrance Wall**	
☐ **Pennant/Streamers**	☐ **Window**	
☐ **Wall**	☐ **Out of Store Marketing Device**	

Sign Dimension: Height: _____ **Width:** _____ **Area:** _____

Estimated Costs of Sign: $ _____

Existing Signs (of same type): ☐ Not Present ☐ Permanent (#) ___ ☐ Temporary (#)___

Permit Fee: $_____ Building Plan Review Fee: $_____

Owner's Name: _____

Phone #: _____ Email Address: _____

Mailing Address: _____

Business Name: _____

Business Address: _____

Business Phone: _____ Business Fax: _____

Contractor Business Name: _____

Agent Name: _____

Mailing Address: _____

Business Phone: _____ Email Address: _____

Business License Number: _____ Issuing Authority: _____

I hereby certify that the site described herein will be constructed and/or used in accordance will all applicable zoning ordinances and laws governing the city of Union City.
Contractor/Owner Signature: _____ Date: _____

FOR OFFICE USE ONLY

Date Submitted: _____ Accepted by: _____

Fee Paid: _____ Permit #: SP- _____

Comments: