



Sign Permit Application

Permit Number

PROJECT INFORMATION				
Project Address	Apt #	Subdivision	Lot	Block
Property Owner Name	Property Owner Address (if different)		Phone	
Applicant Name	Applicant Address		Phone	
Contact Email:				

SIGN TYPE					
CLASS 1, 2, 3, 4 Fee: \$50	<input type="checkbox"/> Minor	<input type="checkbox"/> Window	<input type="checkbox"/> Commercial Real Estate (lease/sale)		
	<input type="checkbox"/> Model Home	<input type="checkbox"/> Wayfinding/Traffic	<input type="checkbox"/> Subdivision Real Estate (direction/sale)		
	Size (Square Feet):				
CLASS 4 Temporary/Event Fee: \$25	<input type="checkbox"/> Banner	<input type="checkbox"/> Inflatable (Balloon)	<input type="checkbox"/> Grand Opening Arrangement		
	Size (Square Feet):		Dates:		
CLASS 5, 6 Fee: \$150	<input type="checkbox"/> Major Free-standing (Pole, Menu Board, etc.)		<input type="checkbox"/> Monument/Subdivision Identification		
	Size (Square Feet):				
CLASS 7 Fee: \$150	<input type="checkbox"/> Awning	<input type="checkbox"/> Canopy	<input type="checkbox"/> Wall	<input type="checkbox"/> Projecting	<input type="checkbox"/> Roof (secondary)
	Size (Square Feet):		Height of Building:	Length of Building:	

CONTRACTOR TRADES (COMPANY NAME) Contractors must validate on this permit before starting work Electrical Contractor / Sign Contractor / General Contractor
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NOTICE I certify that I have read this application and state that the above information is correct. I agree to comply with all city ordinances and state laws relating to building construction, and hereby authorize representatives of this city to enter upon the above-mentioned property for inspection purposes. This permit becomes null and void if work or construction authorized is not commenced within 180 days, or construction on work is suspended or abandoned for a period of 180 days at any time after work is commenced.		
Applicant Name (print)	Applicant Signature	Date

For a complete application, payment must be received within 48 hours of submission.

-----OFFICE USE ONLY BELOW THIS LINE-----

Comments:		
Plan Review Fee:	Received By:	Date:
Permit Fee:	Approved By:	Date: