



Sign Permit Application

Location	Street Address _____	Owner	Name _____
	Ward - Block _____		Street Address _____
	Subdivision - Shopping Ctr. _____		City, State, Zip _____
	Zone _____		Phone Number _____

Contractor	Name _____	Architect	Name _____
	Street Address _____		Street Address _____
	City, State, Zip _____		City, State, Zip _____
	Phone Number _____		Phone Number _____
	License Number _____		License Number _____

Contact	Name _____	Tenant	Name _____
	Street Address _____		Street Address _____
	City, State, Zip _____		City, State, Zip _____
	Phone Number _____		Phone Number _____

Description	Display Area Size _____ x _____	Public Owned _____ Yes _____ No																		
	Estimated Price _____	Located on State Route _____ Yes _____ No																		
	New or Existing _____																			
	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%;">Type</td> <td style="width: 33%;">Structure</td> <td style="width: 33%;">Display Area</td> </tr> <tr> <td>_____ Ground</td> <td>_____ Wood</td> <td>_____ Metal</td> </tr> <tr> <td>_____ Wall</td> <td>_____ Steel</td> <td>_____ Enameled</td> </tr> <tr> <td>_____ Off Premises</td> <td>_____ Aluminum</td> <td>_____ Illuminated</td> </tr> <tr> <td>_____ Window</td> <td></td> <td>_____ Aluminum</td> </tr> <tr> <td></td> <td></td> <td>_____ Plastic</td> </tr> </table>	Type	Structure	Display Area	_____ Ground	_____ Wood	_____ Metal	_____ Wall	_____ Steel	_____ Enameled	_____ Off Premises	_____ Aluminum	_____ Illuminated	_____ Window		_____ Aluminum			_____ Plastic	
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_____ **Office Use Only:** _____

Approved: _____ Date: _____

Comments: