

FEES DOUBLE IF  
WORK IS  
PERFORMED  
WITHOUT PERMIT  
BEING ISSUED



NON -  
TRANSFERABLE  
NO REFUNDS  
EXPIRES IN 180  
DAYS

Permits and Inspections Department

**APPLICATION FOR SIGN PERMIT**

NEW INSTALL \_\_\_\_\_ REPLACE \_\_\_\_\_

**THIS APPLICATION TO BE SUBMITTED WITH DRAWINGS AND SPECS FOR APPROVAL.**  
**IF SIGN IS ELECTRICAL, ELECTRICAL APPLICATION MUST BE SUBMITTED AT THIS TIME.**

DATE OF APPLICATION: \_\_\_\_\_

PROJECT ADDRESS: \_\_\_\_\_ COUNTY: \_\_\_\_\_

LEGAL PROPERTY OWNER: \_\_\_\_\_

Owner's Address/City/State/Zip: \_\_\_\_\_

Owner's Phone #: \_\_\_\_\_

\*CONTRACTOR'S NAME: \_\_\_\_\_

Address/City/State/Zip: \_\_\_\_\_

Contractor's Phone: \_\_\_\_\_

DESCRIPTION OF PROJECT: \_\_\_\_\_

SIGN MESSAGE: \_\_\_\_\_

On/OffPremise \_\_\_\_\_

Total Sq. Ft. Sign \_\_\_\_\_

Width \_\_\_\_\_

Length \_\_\_\_\_

Height \_\_\_\_\_

Single/Double Face \_\_\_\_\_

Wind Load Cap. \_\_\_\_\_

Materials to be used: \_\_\_\_\_

Mounting Materials: \_\_\_\_\_

Ground Sign \_\_\_\_\_

Roof Sign \_\_\_\_\_

Integrated Business \_\_\_\_\_

Wall Sign \_\_\_\_\_

Building/Store Frontage \_\_\_\_\_ Linear Feet

# of Poles \_\_\_\_\_

Electrical/Non-Electrical \_\_\_\_\_

VALUE OF WORK: \$ \_\_\_\_\_

**SCHEDULE OF FEES:**

SIGN OPERATING PERMIT FEE	\$ 9.00 ea	\$ _____
Ground Sign	\$40.00 ea	\$ _____
Wall, Roof or Canopy Sign	\$20.00 ea	\$ _____
First (1 <sup>st</sup> ) 50 sq. ft. of sign face	\$20.00	\$ _____
PLUS \$.15 for each sq. ft. or fraction thereof exceeding 50 sq. ft.	_____sq. ft. over 50sf \$ .15 ea	\$ _____
APPLICATION FEE		\$ <b>10.00</b>
TOTAL SIGN PERMIT FEE		\$ _____

REINSPECTION FEES (If required)  
Reinspect fee is \$15.00 for the first reinspection, and the fee increases in increments of \$15.00 for each subsequent reinspection (Ordinance 2240 adopted 11/10/03)

I HEREBY ACCEPT ALL CONDITIONS SET ABOVE AND CERTIFY THAT ALL STATEMENTS MADE HEREIN ARE TRUE. APPLICANT ACKNOWLEDGES THAT SIGNATURES TRANSMITTED ELECTRONICALLY OR BY FACSIMILE TRANSMISSION HAVE THE SAME LEGAL EFFECT AS ORIGINALS.

.....  
\*Sign Contractor's Original Signature Printed Name Date

