

FEES DOUBLE IF WORK IS PERFORMED WITHOUT PERMIT BEING ISSUED

NON-TRANSFERABLE NO REFUNDS EXPIRES IN 180 DAYS



Permits and Inspections Department
PO BOX 617, 901 Avenue C-Katy, Texas 77492 - 281.391.4830 fax: 281.391.4834 - www.cityofkaty.com
Email: permits.inspections@cityofkaty.com

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: EMAIL:

DESCRIPTION OF PROJECT:

SIGN MESSAGE:

On/Off Premise

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

SCHEDULE OF FEES

VALUE OF WORK: \$

Table with 3 columns: Fee Description, Amount, and Total. Includes SIGN OPERATING PERMIT FEE, Ground Sign, Wall, Roof or Canopy Sign, Application Fee, and 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) (revised 1-8-15)

*Sign Contractor's Original Signature Printed Name Date

