



# Sign Permit Application

<b>Project Address</b>	_____
<b>Applicant</b>	Owner Contractor Tenant Other (describe)_____
<b>Owner / Tenant</b>	Name_____ Phone_____
	Address_____ Email_____
<b>Contractor</b>	Company Name_____ Phone_____
	Contact_____ Email_____
	Address_____
	State Credential #'s _____, _____, _____
	Dwelling Contractor Qualifier # _____ Dwelling Contractor # _____ Building Contractor Registration # _____
<b>Architect / Designer</b>	Company Name_____ Phone_____
	Contact_____ Email_____
	Address_____
<b>Permit Type</b>	<input type="checkbox"/> Industrial <input type="checkbox"/> Commercial <input type="checkbox"/> Multifamily
<b>Category</b>	<input type="checkbox"/> Ground Sign (Pole/Monument) <input type="checkbox"/> Wall Sign (<18" from wall face) <input type="checkbox"/> Projecting Sign (>18" from wall face)
<b>Project Description</b>	_____ _____ _____ _____ _____
<b>Mechanical Permits</b>	Separate permits will be obtained for the following: Electrical by _____ UL Numbers _____
<b>Value of Job</b>	\$ _____ (Value for materials & labor is req. to ensure consistency in accessing permit fees for all applicants.) Payment by: <input type="checkbox"/> Check # _____ <input type="checkbox"/> Cash <input type="checkbox"/> Credit/Debit Card (office or online only)
I certify the above information is complete and accurate. Any deviations from the above submitted information may require additional permits to be obtained. I acknowledge and agree to these terms.	
Name: _____ (Please print) Date: _____	
Signature: _____	