

**APPLICATION FOR SIGN PERMIT**

LOCATION	STREET # (N,S,E,W)                      STREET NAME                      (AV,RD,ST, etc)			<b>PERMIT #</b>
	SUITE/UNIT(S): _____			
	TAX JURISDICTION: <input type="checkbox"/> 0-Mecklenburg <input type="checkbox"/> 1-Charlotte <input type="checkbox"/> 2-Davidson <input type="checkbox"/> 3-Cornelius (Check One) <input type="checkbox"/> 4-Pineville <input type="checkbox"/> 5-Matthews <input type="checkbox"/> 6-Huntersville <input type="checkbox"/> 7-Mint Hill			
	PROPERTY OWNER _____ ADDRESS _____			
	CITY _____ STATE _____ ZIP _____ PHONE # _____			
	<b>TAX PARCEL #</b>	ZONING _____	JURIS _____	MAP # _____
	SPECIAL USE: (circle)    C    D    N    P    S                      STREET CLASSIFICATION: (circle)    I    II    III    IV    V    VI    N/A			
	JOB # _____	PROPERTY USE: _____		
	USDC #    329	REMARKS: _____		
CONTRACTOR	SIGN CONTRACTOR _____ PHONE # _____			
	ADDRESS _____ CITY _____ STATE _____ ZIP _____			
	<b>CONTRACTOR #</b>	BONDED WITH BUILDING STANDARDS DEPARTMENT: <input type="checkbox"/> Yes <input type="checkbox"/> No		
	ELECTRICAL CONTRACTOR _____ PHONE # _____			
	ADDRESS _____ CITY _____ STATE _____ ZIP _____			
	<b>CONTRACTOR #</b>	BONDED WITH BUILDING STANDARDS DEPARTMENT: <input type="checkbox"/> Yes <input type="checkbox"/> No		
OWNER	SIGN OWNER _____ PHONE # _____			
	ADDRESS _____ CITY _____ STATE _____ ZIP _____			
DESCRIPTION	CATEGORY: <input type="checkbox"/> Detached                      Attached: <input type="checkbox"/> Canopy or Awning <input type="checkbox"/> Projecting <input type="checkbox"/> Roof <input type="checkbox"/> Wall			
	TYPE:            BB <input type="checkbox"/> Bulletin Board                      NR <input type="checkbox"/> Non-Residential Park                      PR <input type="checkbox"/> Primary                      TP <input type="checkbox"/> Temp Planned Dev. BU <input type="checkbox"/> Business                      OP <input type="checkbox"/> Off-Premises                      SD <input type="checkbox"/> Secondary                      OT <input type="checkbox"/> Other (Describe) _____ DI <input type="checkbox"/> Directory                      OA <input type="checkbox"/> Outdoor Advertising                      SC <input type="checkbox"/> Shopping Ctr.                      _____ ID <input type="checkbox"/> Identification                      PD <input type="checkbox"/> Planned Development                      SP <input type="checkbox"/> Sponsorship                      _____			
	<b>- GENERAL INFORMATION -</b>			
	ATTACHED: Existing Signs Attached to Building Wall/Roof # _____ Total Sq. Ft. _____ Existing Signs Attached to Entire Building # _____ Total Sq. Ft. _____ Area of Building Wall: Height _____ Ft. _____ In x Width _____ Ft. _____ In. = _____ Sq. Ft. Projection from Building _____ Ft. _____ In.			
	DETACHED: Ground Clearance: _____ Ft. _____ In.                      Total Height: _____ Ft. _____ In. In Sight Distance Triangle: <input type="checkbox"/> Yes <input type="checkbox"/> No                      Distance Behind R/W: _____ Ft. _____ In. Changeable Copy _____ % Total Sign			
	OTHER: Illuminated: <input type="checkbox"/> Yes <input type="checkbox"/> No                      Flashing: <input type="checkbox"/> Yes <input type="checkbox"/> No                      Drawings Attached: <input type="checkbox"/> Yes <input type="checkbox"/> No			
	SIGN SIZE: Height: _____ Ft. _____ In. x Width: _____ Ft. _____ In. = _____ Sq. Ft.			
	REMARKS: _____			
				<b>TOTAL FEE \$</b>

THE UNDERSIGNED HEREBY CERTIFIES THAT HE/SHE IS EITHER THE OWNER OR THE AUTHORIZED AGENT OF THE OWNER AND HEREBY MAKES APPLICATION FOR PERMIT AND INSPECTION OF WORK DESCRIBED AND AGREES TO COMPLY WITH ALL APPLICABLE LAWS REGULATING THE WORK.

APPLICANT'S SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_ PRINT APPLICANT'S NAME \_\_\_\_\_ METHOD OF PAYMENT  
 CASH/CHECK     ACCOUNT

HOLDS	PROCESSED BY	APPROVED BY	VALIDATED BY

**DRAWINGS FOR SIGN PERMIT APPLICATION**

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TAX PARCEL #			JOB #	

EXAMPLES	<p style="font-size: small;">STREET OR VEHICLE ENTRANCE STREET 35' Street sight of way line Obstructions of vision prohibited in this area Street right of way line, or curb line of private vehicle entrance</p>	<p style="font-size: small;">A SIGN B Sign Area = (A) x (B)</p>	<p style="font-size: small;">A SIGN B C D E F SIGN COLUMN HEIGHT Sign Area = (A) x (B) + (C) x (D) + (E) x (F)</p>
	SIGHT DISTANCE TRIANGLE	ATTACHED/WALL SIGN	DETACHED SIGN

**DRAW NEW AND EXISTING SIGNS, STREET R/W'S, DRIVEWAYS, SIGHT DISTANCE TRIANGLES, ETC.**  
(Separate application and drawings required for each sign)

DRAWINGS	SITE PLAN	SIGN

ALL EXISTING AND PROPOSED SIGNS ARE SHOWN WITH EXACT MEASUREMENTS.

APPLICANT'S SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_ PRINT APPLICANT'S NAME \_\_\_\_\_

APPROVED BY