

Mail to: Building Safety
P. O. Box 532
Yorktown, Virginia 23690
(757) 890-3522

PERMIT NO. _____

DATE: _____

SIGN PERMIT APPLICATION

Permission is hereby requested to Erect or Modify a sign or signs in accordance with the following:

LOCATION _____ ZONING DISTRICT _____

Name of property owner _____

Address of property owner _____

Name of sign owner _____

Address of sign owner _____

Name of contractor _____

Address of contractor _____

ARTWORK DEPICTING DIMENSIONS ARE REQUIRED WITH THIS APPLICATION

Structural class of sign: Free-standing Monument Marquee Roof Wall **SIGN FACE CHANGE ONLY**

Will sign be illuminated? Yes No Existing electrical New electrical

(If yes, name of electrical contractor): _____

Illuminated free-standing signs need trench and final inspections.

Width of building face: _____

Overall measurement of sign: _____

Total square footage of sign area: _____

Height of sign: _____ Weight of sign: _____

Set back from property lines: _____

Total square footage of any existing wall signage: _____

Landscape plan for free-standing and monument signs: Yes N/A Value of sign \$ _____

Property owner/tenant acknowledgement of electronic sign regulations: Yes N/A

Zoning Compliance Review

Signature of Applicant

Approved Denied

Print Name

\$122.40 \$132.60 \$142.80 \$163.20

Address

No Fee _____ Total number of signs _____

Address

Business License or Site Approval:

No Yes Applied N/A

Telephone

Date of Application

E-mail Address

Sign Permit Reviewed by

Date