

SIGN PERMIT APPLICATION

Please complete all areas and submit or fax this application to the zoning office .
 Applications for new signs must be accompanied by a site plan and a photo or rendering of the sign.
 Sign applications for tenants in a multi-business building or plaza must be approved by the property owner.
 Applications for replacement signs must be accompanied by a photo or rendering of each the new and prior sign.

Sign Location / Property Address: _____ **Zoning district:** _____

Company name (location): _____ Location phone: _____

Applicant: _____ Affiliation: _____

Applicant mailing: _____

Applicant telephone: _____ Applicant email: _____

Sign Contractor name/phone: _____

Building frontage _____ Unit frontage _____ Does customer entrance face the main street? Yes No

Corner Lot? Yes No Main Rd frontage _____ Lot depth _____

Illuminated? Interior Exterior

PZC No: _____ BZA No: _____ Variance/exception granted: _____ **FEE:** _____

ID Sign face SF: _____ x _____ = _____ SF Ht: _____ Setbacks: Fr _____ Rear _____ L _____ R _____ \$

Real Estate Sign face SF: _____ x _____ = _____ SF Ht: _____ Setbacks: Fr _____ Rear _____ L _____ R _____ \$

Construction Sign face SF: _____ x _____ = _____ SF Ht: _____ Setbacks: Fr _____ Rear _____ L _____ R _____ \$

Subdivision Sign face SF: _____ x _____ = _____ SF Ht: _____ Setbacks: Fr _____ Rear _____ L _____ R _____ \$

Directional Sign face SF: _____ x _____ = _____ SF Ht: _____ Setbacks: Fr _____ Rear _____ L _____ R _____ \$

Wall Sign face SF: _____ New Replacement; SF of prior sign _____ \$

_____ Sign face SF: _____ x _____ = _____ SF Ht: _____ Setbacks: Fr _____ Rear _____ L _____ R _____ \$

_____ Sign face SF: _____ x _____ = _____ SF Ht: _____ Setbacks: Fr _____ Rear _____ L _____ R _____ \$

_____ Sign face SF: _____ x _____ = _____ SF Ht: _____ Setbacks: Fr _____ Rear _____ L _____ R _____

_____ Sign face SF: _____ x _____ = _____ SF Ht: _____ Setbacks: Fr _____ Rear _____ L _____ R _____

_____ Sign face SF: _____ x _____ = _____ SF Ht: _____ Setbacks: Fr _____ Rear _____ L _____ R _____

Temporary Sign face SF: _____ x _____ = _____ SF Ht: _____ Setbacks: Fr _____ Rear _____ L _____ R _____

Temp use display period: From _____ to _____ Must be set back ten feet behind the road right-of-way

Payment methods: Mastercard or Visa debit or credit cards; exact cash or checks made payable to: *City of Green* **Total fees:** _____

THE UNDERSIGNED HEREBY CERTIFIES THAT THE INFORMATION IN AND WITH THIS APPLICATION IS TRUE AND ACCURATE, AND CONSENTS TO AGENTS OF THE CITY ENTERING PREMISES FOR INSPECTION AND VERIFICATION OF INFORMATION SUBMITTED, AND IF THIS APPLICATION IS APPROVED, TO VERIFY CONFORMANCE TO REQUIREMENTS AND CONDITIONS OF SUCH APPROVAL.

Applicant signature: _____ Date: _____

Properly Owner Approval: _____ Property Owner Telephone: _____

Property Owner Printed Name: _____