File #: _____
Permit #: _____
Date: _____
S2

Uniform Construction Code (UCC)

APPLICATION FOR SIGN PERMIT

Sign Type

☐ Ground Sign ☐ Marquee Sign ☐ Pole Sign ☐ Projecting Sign ☐ Roof Sign
☐ Wall Sign ☐ Combination Sign

Location of Sign
Street # and Name _____
City _____ Zip Code _____
Political Subdivision _____ County _____
Owner's name: _____

Proposed Sign Information
(Political Subdivision & County names are required.)

Does municipality have zoning ordinance? ☐ Yes ☐ No Has permit been obtained? ☐ Yes ☐ No
Date obtained _____
Minimum setbacks required by ordinance (ft):
Front _____ Rear _____ Right side _____ Left Side _____
Sign dimensions: _____ (height) **X** _____ (width) = _____ (sq.ft.)
Sign material(s):
_____
Method of attachment:
_____
Illumination: ☐ None ☐ Electrical: ☐ Incandescent ☐ Fluorescent ☐ Neon

Plans Requirements

Three copies of detailed plans and specifications for the proposed sign must accompany this application. These must be drawn to scale on pages which are at least 18" x 24" and sealed by a licensed architect or engineer.
These plans must detail:

- The dimensions of the sign and any supporting members.
- **If roof sign**, the height from the roof level to lowest part of sign and height from roof surface to the top of the sign.
- **If ground sign**, the height from ground level to the top of sign.
- **If a wall sign**, the dimensions of the wall surface of the building to which it will be attached and the location where sign will be attached.
- **If a free-standing sign**, the setbacks from property lines, buildings, driveways and edge of improved road or curb (shown on a plot plan).
- The materials, finish, and the construction including loads (wind & seismic), stresses, anchorage, any illumination, and the fail-safe provisions for animated devices (if any).
- Other pertinent engineering or construction data.

Owner/Applicant Information

If applicant is someone other than owner, list owner information, too:

Applicant (if other than owner):	**Owner:**
_____	_____
Name (typed or printed)	Name (typed or printed)
_____	_____
Phone Number	Phone Number
Mailing Address:	Mailing Address:
_____	_____
_____	_____
_____	_____
_____	_____

FOR L&I USE ONLY Check #: Amount: Bates #: