

CITY OF WASHINGTON SIGN PERMIT APPLICATION

PO Box 1988, Washington, NC 27889 • Phone (252) 975-9383

GENERAL

Project Name: _____ Parcel #: _____ Date: _____
 Project Address: _____ Property Owner's Name: _____
 Sign contractor: _____ Address: _____ Ph. #: _____ Contract cost: _____
 Electrical contractor: _____ Lic. #: _____ Ph. #: _____ Contract cost: _____
 Lot frontage: _____ ft. Side street frontage (if any): _____ ft. Total Contract Cost: _____

DESCRIPTION

FREESTANDING: Total new sign area: _____ x _____ = _____ Sq. ft. Lighted: () Yes () No
Height Width Area

Total height to top of sign: _____ Ft. _____ In. Ground clearance under sign area: Ft. _____ In. _____
 In sight distance triangle: () Yes () No Distance behind Right-of-Way line: Ft. _____ In. _____
 Other than new sign, number of existing freestanding signs: _____ Total sq. footage of all existing signs: _____ Sq. ft.

**ALL POLE SIGNS MUST BE DESIGNED TO MEET 110 MPH WINDLOAD
 FRONT EDGE OF POLE SIGNS MUST BE 2' BEHIND RIGHT OF WAY (SEE DIAGRAM ON BACK)**

ATTACHED: Total new sign area: _____ x _____ = _____ Sq. ft. Lighted: () Yes () No
Height Width Area

Projection from the building: _____ Ft. _____ In. Ground clearance under sign area: Ft. _____ In. _____
 Area of building wall: _____ x _____ = _____ Sq. ft.
Height Width Area

Other than new, number of existing signs attached to building(s): _____ Total sq. footage of all existing signs: _____ Sq. ft.

DRAWINGS

(SEE OTHER SIDE OF FORM FOR EXAMPLE)

DRAW DIAGRAM OF LOT, SHOWING NEW AND EXISTING SIGNS, R/W'S, DRIVEWAYS, SIGHT DISTANCE TRIANGLES, ETC.

DRAW DIAGRAM OF SIGN, GIVING EXACT DIMENSIONS

SIGNATURE

Permit expires if work or construction is not begun within 6 months, or if construction or work is suspended or abandoned for a period of 12 months at any time after work has begun. I affirm that all information is true and correct, that I will complete all work, call for all inspections in a timely manner and comply with the requirements of all local, state and federal codes and regulations.

Signed: _____ Date: _____

OFFICIAL USE

PERMIT FEE: _____ ZONING DISTRICT: _____ HISTORIC DISTRICT: _____ YES - (attach COA) _____ NO PRIMARY FIRE DISTRICT: _____ YES _____ NO

DATE: _____ APPROVED BY: _____ COMMENTS: _____