



**BUILDING PERMIT APPLICATION**  
**BUILDING & SAFETY DIVISION/COMMUNITY DEVELOPMENT**

**BS** \_\_\_\_\_  
**DATE:** \_\_\_\_\_

**SIGN**

THIS IS A PERMIT APPLICATION ONLY. WORK IS NOT AUTHORIZED UNTIL FEES HAVE BEEN PAID AND A PERMIT HAS BEEN ISSUED.

<b>ADDRESS:</b>		<b>CONSTRUCTION VALUATION \$:</b>		<b>DATE:</b>	
DESCRIPTION					
NAME OF EXISTING BUSINESS/TYPE:			NAME OF NEW BUSINESS/TYPE:		
<b>OWNER</b>		<b>APPLICANT</b>		<b>CONTRACTOR</b>	
ADDRESS		ADDRESS		ADDRESS	
CITY/ STATE/ ZIP		CITY/ STATE/ ZIP		CITY/ STATE/ ZIP	
PHONE		PHONE	LICENSE	PHONE	LICENSE
E-MAIL		E-MAIL		E-MAIL	

<b>PRE-SUBMITTAL ZONING REVIEW:</b> PRELIMINARY REVIEW ONLY – NOT AN APPROVAL		<b>ZONE</b>	<b>OK FOR PLAN CHECK:</b> <input type="checkbox"/> YES <input type="checkbox"/> NO		<b>OK OTC</b> <input type="checkbox"/>	<b>BY:</b>	<b>DATE:</b>
			<b>PLANNING ENTITLEMENT:</b> <input type="checkbox"/> YES <input type="checkbox"/> NO				

COMMENTS:

<input checked="" type="checkbox"/>	<b>FLOOR/SUITE</b>	<input checked="" type="checkbox"/>	<b>STRUCTURE TYPE</b>		
	FLOOR:		ACCESSORY STRUCTURE - COM	HOTEL/ MOTEL	
	SUITE/ UNIT #:		APARTMENT	INDUSTRIAL/ MANUFACTURING	
			ASSISTED LIVING/DAY CARE	INSTITUTIONAL	
<input checked="" type="checkbox"/>	<b>PROJECT TYPE</b>		AUTOMOTIVE	MEDICAL/DENTAL	
	NEW STRUCTURE		CONDOMINIUM	OFFICE	
	TENANT IMPROVEMENT		CITY FACILITY	PARKING LOT	
	SITE IMPROVEMENTS		EDUCATIONAL	PARKING STRUCTURE	
<input checked="" type="checkbox"/>	<b>ZONE</b>	<b>SETBACK (FROM PROP. LINE)</b>		<b>HEIGHT (TO TOP OF SIGN)</b>	
	BCC1/ MPC1	TO POLE: _____ FT		ABOVE GRADE: _____ FT	
	OTHER ZONE	TO FACE OF SIGN: _____ FT		ABOVE ROOF: _____ FT	
<input checked="" type="checkbox"/>	<b>TYPE OF SIGN</b>				
	WALL SIGN	MARQUEE SIGN		POLE SIGN	
	ROOF SIGN	VALENCE SIGN		MONUMENT SIGN	
	PAINTED SIGN	PROJECTING SIGN		ELECTRIC SIGN	
				MOVING SIGN	

<b>SIGN AREA</b>					
STREET FRONTAGE		PARKING LOT FRONTAGE		MAX. SIGN AREA: _____ SF	
STREET: _____ FT		LOT: _____ FT		EXISTING SIGN AREA: _____ SF	
SIDE STREET: _____ FT		(ENTRANCE FACING PARKING LOT ONLY)		AVAILABLE SIGN AREA: _____ SF	
				PROPOSED SIGN AREA: _____ SF	
				REMAINING SIGN AREA: _____ SF	

<b>MAXIMUM SIGN AREA CALCULATION</b>					
<b>ALL ZONES EXCEPT BCC1/ MPC1</b>			<b>BCC1/ MPC1 ZONES ONLY</b>		
STREET FRONTAGE (3 SF/ LF)			STREET FRONTAGE BCC1/ MPC1 (2 SF/ LF)		
SIDE STREET FRONTAGE (1 SF/ LF)			SIDE STREET FRONTAGE (1 SF/ LF)		
PARKING LOT FRONTAGE (1 SF/ LF)			PARKING LOT FRONTAGE BCC1/ MPC1 (2 SF/ LF)		
<b>MAXIMUM SIGN AREA</b>			<b>MAXIMUM SIGN AREA</b>		

<b>FIRE DEPT.</b>		<b>BWP/WATER</b>		<b>PW/SEWER</b>		<b>PUBLIC WORKS DEPT.</b>	
PLAN CHECK: <input type="checkbox"/> YES <input type="checkbox"/> NO		FEE REQ'D: <input type="checkbox"/> YES <input type="checkbox"/> NO		INTERCEPTOR REQUIRED:		ADDRESS APPROVED:	
PLAN CHECK FEE: _____		FEE PAID: _____		<input type="checkbox"/> YES <input type="checkbox"/> NO		PEDESTRIAN PROTECTION REQ'D:	
DATE: _____ BY: _____		DATE: _____ BY: _____		DATE: _____ BY: _____		<input type="checkbox"/> FENCE <input type="checkbox"/> CANOPY <input type="checkbox"/> NONE	
						BY: _____	
						STREET IMPROVEMENT INSPECTION:	
						PERMIT NO. _____	
						CURB CUT WIDTH: _____	
<b>PARKS &amp; REC</b>		<b>BWP/ELECT</b>		BACKWATER VALVE REQUIRED:		SETBACK FOR STREET WIDENING:	
APPROVED:		FEE REQ'D: <input type="checkbox"/> YES <input type="checkbox"/> NO		<input type="checkbox"/> YES <input type="checkbox"/> NO		BY: _____	
DATE: _____ BY: _____		FEE PAID: _____		DATE: _____ BY: _____		SITE PLAN CHECKED FOR EASEMENTS	
						BY: _____	
						PUBLIC WORKS DEPT REQ'D NOTED:	
						CHECK SHEET: <input type="checkbox"/> YES <input type="checkbox"/> NO	
						BY: _____	

<b>PLANNING DIVISION (PLANNING APPROVAL GIVEN ONLY AFTER ALL OF THE ABOVE APPROVALS ARE OBTAINED)</b>					
PROJECT NO.	ZONE	ENTITLEMENT DATE	BY:	COMMENTS	
APPROVED BY:		DATE:	FEE:		

**I DECLARE THAT THE FOLLOWING STATEMENTS ARE TRUE TO THE BEST OF MY KNOWLEDGE AND BELIEF:**  
 I HEREBY ACKNOWLEDGE THAT I HAVE READ THIS APPLICATION AND THAT INFORMATION STATED HEREON IS TRUE. I AGREE TO COMPLY WITH ALL ORDINANCES AND STATE LAWS REGULATING BUILDING CONSTRUCTION. I UNDERSTAND AND AGREE THAT SHOULD I FAIL TO COMPLY WITH THE ABOVE, ALL PERMITS SHALL BE DEEMED REVOKED.  
 SIGNATURE OF APPLICANT: \_\_\_\_\_ DATE: \_\_\_\_\_