Town of Union

OFFICE OF BUILDING INSPECTION/CODE ENFORCEMENT

Application for a Sign

APPLICANT:				_ CO	NTACT PHONE	#	
ADDRESS:							
LOCATION OF SIG	N:						
# OF ILLUMINATED: # OF				# OF NON-	NON-ILLUMINATED:		
PURPOSE: Erect _	, Repai	r, Alter	, Relo	ocate,	Maintain	_ at the above location.	
Туре	Number	Size	Area	Coverage	Height	Internal/External Lightin	
Monument							
Pylon							
Wall							
Projecting							
Marquee							
Window							
Suspended							
Awning/Canopy							
Door							
Off-Premises							
SIGN SETBACKS: F	ront,	Side,	Rear	_			
PROPOSED LOCAT	TON ON BUI	LDING.	·			URE ELEVATION SHOW	
For Off-Premises Signs: List two existing nonconforming off-pre Address					Date of Removal Square Footage		
						- cquarer conge	
ILLUMINATED SIG		UMBER			CO. COV	EDAGE	
I ODLIC LIADILITI	JOND					LINAGE	
NAME & ADDRESS	OF CONTRA	ACTOR:					
NAME & ADDRESS	OF BUILDIN	IG OWNER:					
(written consent o				th this appli	cation)		
			AGREEN		•		
			ir, alteration,	relocation or		f the above described sign nances of the Town of	
FEE: \$			APPLICA	ANT:			
					Owner, Co	ntractor	
DATE OF APPROVAL	:		APPRO\	/ED:			
						rcement Officer	
Darmit Na.							