

# Town of Union

OFFICE OF BUILDING INSPECTION/CODE ENFORCEMENT

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## Application for a Sign

APPLICANT: \_\_\_\_\_ CONTACT PHONE # \_\_\_\_\_

ADDRESS: \_\_\_\_\_

LOCATION OF SIGN: \_\_\_\_\_

# OF ILLUMINATED: \_\_\_\_\_ # OF NON-ILLUMINATED: \_\_\_\_\_

PURPOSE: Erect \_\_\_\_\_, Repair \_\_\_\_\_, Alter \_\_\_\_\_, Relocate \_\_\_\_\_, Maintain \_\_\_\_\_ at the above location.

Type	Number	Size	Area	Coverage	Height	Internal/External Lighting
Monument						
Pylon						
Wall						
Projecting						
Marquee						
Illuminated						
Window						
Suspended						
Awning/Canopy						
Door						

SIGN SETBACKS: Front \_\_\_\_\_, Side \_\_\_\_\_, Left Rear \_\_\_\_\_, Right Rear \_\_\_\_\_

REQUIRED SUBMITTAL: DIAGRAM OF SIGN SHOWING MEASUREMENTS; PLOT PLAN OF PROPERTY INDICATING PROPOSED SETBACKS FOR PYLON/GROUND/MONUMENT SIGN; OR PICTURE ELEVATION SHOW PROPOSED LOCATION ON BUILDING.

ILLUMINATED SIGN LISTING NUMBER \_\_\_\_\_

PUBLIC LIABILITY BOND: \_\_\_\_\_ CO. COVERAGE \_\_\_\_\_

NAME & ADDRESS OF CONTRACTOR: \_\_\_\_\_

NAME & ADDRESS OF BUILDING OWNER: \_\_\_\_\_

(written consent of owner if not applicant to be filed with this application)

### AGREEMENT

I hereby make application for the erection, repair, alteration, relocation or maintenance of the above described sign and further agree that the work will be done in accordance with the provisions of the Ordinances of the Town of Union.

FEE: \$ \_\_\_\_\_

APPLICANT: \_\_\_\_\_

Owner, Contractor

DATE OF APPROVAL: \_\_\_\_\_

APPROVED: \_\_\_\_\_

Code Enforcement Officer