

PERMIT #: PROJECT #: TOTAL FEE: \$

PROJECT NAME: USDC #329

LOCATION

STREET # N,S,E,W STREET NAME AV, RD, ST ETC

SUITE/UNIT TAX PARCEL # ZONING DISTRICT

PROPERTY USE:

REMARKS:

CONTACTS

PROPERTY OWNER ADDRESS

CITY STATE ZIP PHONE #

SIGN OWNER PHONE #

ADDRESS CITY STATE ZIP

BEST CONTACT METHOD: PHONE # E-MAIL:

SIGN CONTRACTOR PHONE #

ADDRESS CITY STATE ZIP

CONTRACTOR # CONTACT PERSON

PROPOSED SIGNAGE

CATEGORY: Detached Attached: Canopy/Awning Projecting Wall

SIGN DESCRIPTION (verbiage on sign):

PROPOSED DETACHED SIGN:

Height: Ft. In. x Width: Ft. In. = Sq. Ft.
Is The Sign Illuminated?: Yes No
Ground Clearance of Sign: Ft. In. Total Height of Sign Ft. In.
Does The Proposed Sign Flash? Yes No Will Sign Located Within Sight Triangle? Yes No
Distance Sign Located Behind Right-Of-Way: Ft. In. Percentage of Changeable Copy %

Any Existing Detached Signs On This Parcel? Yes No

Existing Sign Size: Height: Ft. In. x Width: Ft. In. = Sq. Ft.
Existing Sign Height: Ft. In. Ground Clearance of Existing Sign: Ft. In.
Photos/Drawings of Existing Detached Signs Attached to Application? Yes No Street Classification?

PROPOSED ATTACHED SIGN (for each wall elevation): Right Left Rear Front #

Height: Ft. In. x Width: Ft. In. = Sq. Ft.
Is The Sign Illuminated?: Yes No
Does The Proposed Sign Flash? Yes No Proposed Sign Projection from Building Wall? Ft. In.
Area of building wall: Height: Ft. In. x Width: Ft. In. = Sq. Ft.

Any Existing Permitted Signs Attached to Wall Elevation? Yes No

Existing Sign Size: Height: Ft. In. x Width: Ft. In. = Sq. Ft.
Percentage of Building Wall with Existing Wall Signs? %
Photos/Drawings of Existing Wall Signs Attached to Application? Yes No

Roof signs and signs extending above parapet walls are prohibited. Existing detached signs must be removed for new approved detached signs.

ORDINANCE CODE SECTION USED TO APPROVE PERMIT APPLICATION:

REMARKS:

THE UNDERSIGNED HEREBY CERTIFIES THAT HE/SHE IS EITHER THE OWNER OR THE AUTHORIZED AGENT OF THE OWNER AND HEREBY MAKES APPLICATION FOR PERMIT AND INSPECTION OF WORK DESCRIBED AND AGREES TO COMPLY WITH ALL APPLICABLE LAWS REGULATING THE WORK. SIGN APPLICATION APPROVAL DOES NOT PROVIDE ZONING APPROVAL FOR BUSINESS USE. NO REFUNDS WILL BE PROCESSED AFTER ISSUANCE OF THIS PERMIT.

APPLICANT'S SIGNATURE DATE PRINT APPLICANT'S NAME

Make checks payable to: CITY OF CHARLOTTE C/O NBS-Zoning & Permitting Division 700 North Tryon Street Charlotte, NC 28202

METHOD OF PAYMENT CASH/CHECK ACCOUNT

ORIGINAL-white PERMIT-blue FILE COPY-yellow

Table with 2 columns: APPROVED BY, DATE