SIGN PERMIT APPLICATION

Planning Department
115 N. Polar Street / PO Box 785
Aberdeen, NC 28315
Phone: (910)944-7024 Fax: (910)944-7459

APPLICANT/SIGN COMPANY INFORMATION	PROPERTY OWNER INFORMATION
Applicant:	Owner Name:
Address:	Owner Address:
Phone:	Owner Phone:
Email:	Email:

PROPERTY INFORMATION	
Property Address:	Zoning District:

SIGN SPECIFICATIONS

□ Wall Sign □ Free Standing □ Monument Sign □ Window Sign
□ Shopping Center Wall Sign □ Shopping Center Freestanding Sign

Corner Lot? □ Yes □ No	Lighted Sign? □ Yes □ No	Linear Building Frontage:	Linear Road Frontage:
Sign Height:	Sign Width:	Total Sign Square Footage:	
Height of Sign Above Ground:	Height of Sign Support:	Distance of Setback:	
Sign Copy:	Total number of signs currently on property:		

I hereby certify that all information in this application is correct and all work will comply with the Sate Building Code and all other applicable State and local laws, Ordinance and regulations.

_____ _____

Applicant Signature **Date**

Office Use Only				
Sign Permit:	**#**	**$**	**Date:**	**Staff Signature:**

A FULLY DIMENSIONED SKETCH OF ALL PROPOSED SIGN MUST ACCOMPANY THE APPLICATION.