

TOWN OF CAMBRIA

SIGN USE PERMIT APPLICATION

TYPE OF SIGNAGE: PERMANENT TEMPORARY

SBL# _____

PERMIT # _____

OWNER OF PROPERTY:

APPLICANT:

NAME _____

NAME _____

ADDRESS _____

ADDRESS _____

TOWN/CITY _____

TOWN/CITY _____

ZIP _____

ZIP _____

PHONE # _____

PHONE # _____

CELL # _____

CELL # _____

FAX # _____

FAX # _____

*General application "SHALL" be accompanied by a Site Plan showing all structures & existing signage on premises. Dimensions of existing signage "SHALL" be included. Proposed signage "SHALL" be shown in dimensional & location detail.

DATE OF APPLICATION:

MO ___ DAY ___ YR ___

No sign "SHALL" be permitted, new, altered or existing unless it conforms to the requirements of this law & a new up-to-date use permit.

Sign permits "SHALL" be a separate permit & required in addition to building permits.

Sign Regulation – All sign regulations are included in order to insure compliance to this regulation. Review the regulations which pertain to your proposal. Please sign & date below to verify that the owners, applicant or designer has reviewed the necessary information.

SIGNATURE: _____

DATE: _____

REVIEWED: Y ___ N ___

CALCULATIONS FOR BUILDING PERMITS

Zoning Classification: – Check (1) one:

Agricultural () Agricultural Residential () Residential-1 () Residential-2 ()
Business-1 () Business-2 () Residential Manufactured Home () Industrial ()
Industrial Park ()

New Sign Proposal:

Building Wall Sign(s) Number of _____ Total Sq. Ft. _____

Free-Standing Remote Sign(s) Number of _____ Total Sq. Ft. _____

Existing Sign(s):

Building Wall Sign(s) Number of _____ Total Sq. Ft. _____

Free-Standing Remote Sign(s) Number of _____ Total Sq. Ft. _____

****NOTE:** - Excluding allowed sign(s) in Section 261-111 (D)

Does total signage square footage exceed the allowable limits:

Estimate of Cost: _____

Yes - Total Sq. Ft. over _____

Total Percent of Sq. Ft. over _____

No