



## SIGN PERMIT APPLICATION

File #: \_\_\_\_\_

*Please read and complete the application carefully. Failure to provide all required information could result in a delay in processing your application.*

### Location Information:

**Physical Address of Proposed Sign:** \_\_\_\_\_

**Name of Business:** \_\_\_\_\_

**Business Mailing Address:** \_\_\_\_\_

**Business Phone:** \_\_\_\_\_

**Business E-mail:** \_\_\_\_\_

**Sandpoint Business License No.:** \_\_\_\_\_

### Applicant Information:

**Applicant's Name:** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_

**Phone:** (W) \_\_\_\_\_ (H) \_\_\_\_\_

**E-mail:** \_\_\_\_\_

**Building Owner's Name:** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_

**Phone:** (W) \_\_\_\_\_ (H) \_\_\_\_\_

**E-mail:** \_\_\_\_\_

(\*Some permits may require authorization/approval of Building Owner prior to issuance.)

**Sign Contractor/Installer:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Phone:** \_\_\_\_\_

**E-mail:** \_\_\_\_\_

**Value of Proposed Sign(s):** \$ \_\_\_\_\_ (include cost of materials and installation)

**Staff Use Only**

**Permit Fee:** \$ \_\_\_\_\_ **Paid** \_\_\_\_\_

**Sign District:** Downtown Overlay  General  Nonconforming/Conditional Use

**Permitted Number of Signs:** \_\_\_\_\_ **Allowed Sign Area:** \_\_\_\_\_

**Included in Master Sign Program** Yes  No  **For:** \_\_\_\_\_

**Sign Information:**

**Linear Frontage of Building:** \_\_\_\_\_

**Number of Existing Signs:** \_\_\_\_\_

**Note:** Height of freestanding or roof signs should be measured from adjoining grade to top of sign support structure. All other height measurements should be listed as separation between grade/sidewalk to bottom of sign.

Existing Signage:						
Will Sign Remain?		Freestanding	Wall	Projecting	Canopy	Roof
Yes <input type="checkbox"/> No <input type="checkbox"/>	Area:	___ x ___ = ___ s.f.				
	Height:	_____ ft.				
Yes <input type="checkbox"/> No <input type="checkbox"/>	Area:	___ x ___ = ___ s.f.				
	Height:	_____ ft.				
Yes <input type="checkbox"/> No <input type="checkbox"/>	Area:	___ x ___ = ___ s.f.				
	Height:	_____ ft.				
Yes <input type="checkbox"/> No <input type="checkbox"/>	Area:	___ x ___ = ___ s.f.				
	Height:	_____ ft.				

Please provide color photographs of **ALL** existing signage (digital copies may be e-mailed to cityplanning@ci.sandpoint.id.us).

**Number of Proposed Signs:** Existing to be refaced: \_\_\_\_\_

New: \_\_\_\_\_

Proposed Signage:				
	Freestanding	Wall	Projecting	Canopy
Area:	___ x ___ = ___ s.f			
Height:	_____ ft.	_____ ft.	_____ ft.	_____ ft.
Area:	___ x ___ = ___ s.f			
Height:	_____ ft.	_____ ft.	_____ ft.	_____ ft.
Area:	___ x ___ = ___ s.f			
Height:	_____ ft.	_____ ft.	_____ ft.	_____ ft.
Area:	___ x ___ = ___ s.f			
Height:	_____ ft.	_____ ft.	_____ ft.	_____ ft.

Proposed construction materials: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Proposed wording and colors: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

How will sign(s) be attached/installed? \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

How will sign(s) be illuminated? \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**Please use the space below to draw (to scale) the proposed sign.  
Photographs of existing signs or approved shop drawings of new signs should be included.  
If sign is to be freestanding, a site plan to scale showing location should also be included.  
Foundation details and stamped engineered drawings may be required.**

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*I hereby certify that I have read and examined this application and know the same to be true and correct. I will comply with all provisions of applicable laws and ordinances. I understand that the granting of a permit does not give authority to violate provisions of any state or local laws regulating construction or the performance of construction.*

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Name

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Date