

CITY OF CLANTON

PO BOX 580 CLANTON AL 35046 205-755-6840 FAX 205/755-6799

BUILDING DEPARTMENT – APPLICATION FOR SIGN PERMIT

THE UNDERSIGNED RESPECTFULLY MAKES APPLICATION TO ERECT, INSTALL, ENLARGE, ALTER, REPAIR, CONVERT OR REPLACE A SIGN IN ACCORDANCE WITH THE SIGN REGULATIONS OF THE CITY OF CLANTON.

NAME OF PROJECT: _____

PROJECT ADDRESS: _____

OWNER: _____ CONTRACTOR: _____

ADDRESS: _____ ADDRESS: _____

PHONE: _____ PHONE: _____

CELL PH: _____ CELL PH: _____

CITY LIC. #: _____

DESCRIPTION OF WORK TO BE PERFORMED: _____

ELECT. CONTR.: _____ CITY LIC. # _____

THE FOLLOWING INFORMATION MUST BE INCLUDED WITH APPLICATION:

- 1) A COMPLETE DESCRIPTION OF THE SIGN(S) TO BE ERECTED, INCLUDING NUMBER, TYPE, FREESTANDING OR ATTACHED, METHOD OF ILLUMINATION, ON OR OFF PREMISES DISPLAY AND SETBACKS.
- 2) A DIMENSIONED SKETCH OF THE SIGN(S) AND A PLOT PLAN SHOWING THE LOCATION OF EACH SIGN ON THE LOT.
- 3) FOOTING DESIGNS, ELECTRICAL DESIGNS, SIGN FACE COPY.
- 4) OTHER DETAILS SUFFICIENT FOR THE BUILDING INSPECTOR TO DETERMINE COMPLIANCE WITH THE REQUIREMENTS OF THIS ARTICLE, WHICH MAY INCLUDE A BUILDING ELEVATION, SURVEY OR OTHER DRAWINGS OR DOCUMENTATION SATISFACTORY TO ASSESS A PERMIT FOR AN ATTACHED SIGN.

VALUATION OF PROJECT: \$ _____

I HEREBY CERTIFY THAT I HAVE READ THIS APPLICATION AND THAT ALL INFORMATION CONTAINED HEREIN IS TRUE. IF ANY PORTION OF THIS INFORMATION, EITHER INTENTIONALLY OR UNINTENTIONALLY IS FALSE OR IS A MISREPRESENTATION OF THE MATERIAL FACTS, THE PERMIT OR PROCESS GRANTED WILL BE VOID. I FURTHER CERTIFY THAT IF I AM NOT THE OWNER, I HAVE PROPER AUTHORIZATION FROM THE OWNER TO ACT AS REPRESENTATIVE ON HIS/HER BEHALF AND THAT I MAY BE REQUIRED TO PROVIDE WRITTEN DOCUMENTATION OF SUCH AUTHORIZATION TO THE CITY OF CLANTON.

SIGNATURE (APPLICANT) DATE

SIGNATURE (BUILDING OFFICIAL) DATE

PERMIT NO:	FEE:
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OFFICE USE ONLY:
