

Supplemental to Land Use Application

DATE RECEIVED: _____ PLANNING FILE #: _____ APPLICATION COMPLETE: ____

I. Proposed Sign Location

Physical Address:

Permit No.

II. Type of Sign							
Permanent: 🗌		Replacement: 🗌		Temporary: 🗆			
(Please check all that apply)			Location:				
Free Standing Sign			□Rear				
□Wall Sign			□Front				
□Roof Sign			□Side				
□Projecting Sign			□Roof				
□Other:			□Off-site				
Zone: (Check one box below)							
R-1 🗌	R-2 🗌	CD-1 🗌	CD-2 🗌	CD-3 🗌	CD-R1 🗌		
CD-R2 🗌	C-1 🗆 *	C-2 □*	C-3 🗌	LI 🗆 *	HI 🗆		
*Architectural Review: Certificate of Appropriateness may be required							
Description of Sign:							
_							

III. Sign Dimensions and Materials (attach all relevant information)				
Horizontal Dimension:	Vertical Dimension:			
Distance to Street:	Height:			
Length of Street Frontage:	Color(s):			
Illumination: Yes \Box No \Box	Total Square Footage:			
Material(s):				

IV. Graphic: Please provide a graphic of your proposed sign (including dimensions, colors, location on the property, and setbacks to scale) also include a copy of the proposed sign's finished design.

In addition to this completed form, the applicant must provide the following:

- A completed Land Use Application: Sign Permit
- Other information deemed necessary by the Planning Director to allow review of the applicant's proposal.
- Payment of applicable review fees, which can be found on the City's web page.

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and belief.						
I hereby certify that the statements contained herein are in all respects true and correct to the best of my knowledge						

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Property Owner/Applicant Signature	Date
X	
Applicant's Representative Signature	Date