

**TOWN OF SUMMERDALE  
DEPARTMENT OF BUILDING AND ZONING  
APPLICATION FOR SIGN PERMIT**

Sign Location: \_\_\_\_\_ Zoning District: \_\_\_\_\_

Applicant

Sign Contractor

Name: \_\_\_\_\_

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

City/Zip: \_\_\_\_\_

Phone No.: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Type of Sign: If so, type of illumination: \_\_\_\_\_ No. of foot candles: \_\_\_\_\_

Size of sign: \_\_\_\_\_ Building frontage (in ft.): \_\_\_\_\_

Square footage of all other signage on building:

Business Name

Size of Sign

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**FOR OFFICE USE ONLY:**

Fee:

Temporary Sign: \_\_\_\_\_

Permanent Sign: \_\_\_\_\_

**Total Permit Fee: \$** \_\_\_\_\_

Date of completed application: \_\_\_\_\_ Date approved by Planning Commission (if required): \_\_\_\_\_

Date of Permit: \_\_\_\_\_

Permit No.: \_\_\_\_\_

I hereby acknowledge that I have read this application and the attached instruction sheet and state that it is correct and agree to comply with all the Town of Summerdale Ordinances.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Building Owner

\_\_\_\_\_  
Date