



# Town of Wilkesboro

## SIGN PERMIT APPLICATION

Planning and Community Development

203 West Main Street | P.O. Box 1056

Wilkesboro, NC 28697

P: 336.838.3951 | F: 336.838.7616

planning@wilkesboronc.org

<b>APPLICATION</b>	DATE:		<b>PERMIT APPLICATION NUMBER</b>
	TYPE OF SIGN: <input type="checkbox"/> WALL MOUNTED <input type="checkbox"/> FREE STANDING/ PYLON		
	PARCEL NO:	ZONING:	<b>SHADED AREAS FOR DEPARTMENT USE ONLY.</b>
	LOCATION OF PROJECT (ADDRESS):		
	NAME OF PROPOSED PROJECT:		
	APPLICANT/ REP. NAME:		
	APPLICANT/ REP. ADDRESS:		
	PHONE:	FAX NUMBER:	
	EMAIL:		
	PROPERTY OWNER NAME* ( <i>signature required below</i> ):		
PROPERTY OWNER ADDRESS:			
PHONE:	FAX NUMBER:		
PROPERTY OWNER EMAIL:			
<b>PROJECT INFORMATION</b>	LENGTH OF BUILDING FRONTAGE (FT):		TOTAL SQ. FT. PROPOSED:
	NO. OF SIGNS REQUESTED:	NO. OF SIGNS EXISTING:	TOTAL SQ. FT. OF EXISTING:
	<b>TYPE (INDICATE FREE STANDING, ATTACHED, AWNING, OTHER)</b>	<b>DESCRIPTION</b>	<b>ILLUMINATED OR ELECTRONICALLY CHANGEABLE?</b>
		SIZE:                      SQ. FT.: HEIGHT ABOVE GRADE:	
		SIZE:                      SQ. FT.: HEIGHT ABOVE GRADE:	
		SIZE:                      SQ. FT.: HEIGHT ABOVE GRADE:	
	<b>SUBMITTAL INFORMATION – see staff to determine which requirements apply</b>		
<input type="checkbox"/> PLANS SHOWING ALL DIMENSIONS, INCLUDING SIGN LOCATIONS.			
<input type="checkbox"/> VICINITY MAP WITH NORTH ARROW			
<b>SIGNATURE</b>	<b>PROPERTY OWNER'S CONSENT:</b> I declare that I am the owner of said property or have written authority from property owner to file this application. I certify that all of the submitted information is true and correct to the best of my knowledge and belief. I understand that any misrepresentation of submitted data may invalidate any approval of this application.		
	SIGNATURE:		DATE:
<b>DEPT.</b>	RECEIVED BY:	DATE:	FEE: