

SIGN PERMIT APPLICATION
(Article 9 of the Zoning Ordinance)



INSTRUCTIONS TO APPLICANT:

1. Application Fees: \$150.00
2. Answer all questions as directed by the Zoning Officer.
3. Attach a scaled drawing diagram, construction plan and/or site plan, illustrating the proposed sign, its message, and its means of support.
 - A. If the sign is to be attached to a structure show the relationship between sign and the roof peak, the roof eave, and any windows
 - B. If the sign is to be freestanding, illustrate any proposed landscaping for the ground area under the sign.
4. Attach a list that describes types, numbers and sizes of all other signs on the property.

FOR CITY USE ONLY	
PERMIT NO.	_____
DATE FILED	_____
ZONING DISTRICT	_____
APPROVED _____ DENIED _____	
APPROVED BY _____	DATE _____
ZONING BOARD ACTION REQUESTED:	
YES _____	NO _____
BOARD ACTION _____	DATE _____
NOTES	_____
*SECTION 426 - C-1 ZONE LIMIT/1 FREE STANDING SIGN, EXCEPT LOT WITH TWO (2) FRONTAGES (150 SQUARE FOOT LIMIT)	

PERMISSION IS HEREBY REQUESTED TO ERECT RELOCATE REMOVE A SIGN OR SIGNS IN ACCORDANCE WITH THE FOLLOWING:

1. LOCATION _____
2. NAME OF PROPERTY OWNER _____ ADDRESS _____
3. NAME OF SIGN OWNER _____ ADDRESS _____
4. NAME OF SIGN OCCUPANT _____ ADDRESS _____
5. NAME OF CONTRACTOR _____ ADDRESS _____
6. COPY OF SIGN OR DESCRIPTION OF DISPLAY _____
7. TYPE OF PROPOSED FUNCTION

<p>A. FUNCTIONAL TYPE (check one)</p> <p>Identification _____</p> <p>Business _____</p> <p>Advertising _____</p> <p>Real Estate _____</p> <p>Development _____</p> <p>Institutional _____</p> <p>On-Site Directional/ Informational _____</p>	<p>B. STRUCTURAL TYPE (check one)</p> <p>Free Standing _____</p> <p>Wall _____</p> <p>Projecting _____</p>
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8. WILL SIGN HANG OVER CITY RIGHT-OF-WAY? YES _____ NO _____
9. IS CITY COUNCIL APPROVAL REQUIRED FOR PROJECTION OVER CITY RIGHT-OF-WAY?
YES _____ NO _____
10. NUMBER OF SQ.FT. OF SIGN AREA FOR ALL EXISTING AND PROPOSED SIGNS ON PROPERTY

11. IS SIGN ILLUMINATED? YES _____ NO _____
12. ESTIMATED COST OF SIGN _____
13. NUMBER OF FACES _____
14. DIMENSIONS _____ BY _____

15. SURFACE AREA PER SIGN FACE _____

16. HEIGHT OF TOP EDGE ABOVE GRADE _____

17. HEIGHT OF BOTTOM EDGE ABOVE GRADE _____

18. FRONT FOOTAGE OF PROPERTY _____

19. LOCATION ON PROPERTY:

FRONT _____ feet from property line to edge of sign SIDE _____ feet from property line of edge of sign
SIDE _____ feet from property line to edge of sign REAR _____ feet from property line of edge of sign

20. IS THE SUBJECT PROPERTY ADJACENT TO S.R. 309/ S.R. 315/LIMITED ACCESS HIGHWAY?
YES _____ NO _____

21. IS THIS SIGN INSTALLATION REQUESTED TO A CHANGE IN OCCUPANCY OR USE OF THE SUBJECT
PROPERTY? YES _____ NO _____ EXPLAIN _____

*IF THERE IS A CHANGE IN OCCUPANCY OR USE A ZONING PERMIT IS REQUIRED.

22. IS THE PROPOSED SIGN STRUCTURE AND SIGN COPY AND DISPLAY THE PROPERTY OF APPLICANT
AND/OR OWNER?

APPLICANT _____ YES _____ NO _____ EXPLAIN _____
OWNER _____ YES _____ NO _____ EXPLAIN _____

I CERTIFY THAT THE INFORMATION ON THIS FORM IS COMPLETE AND ACCURATE TO THE BEST OF MY
KNOWLEDGE, AND THAT THE SIGN DESCRIBED ABOVE WILL BE CONSTRUCTED IN CONFORMANCE WITH
THE REQUIREMENTS OF THE CITY OF WILKES-BARRE ZONING ORDINANCE.

Signature of Applicant / Occupant

Phone

Address

Date

Owner Signature (if not applicant)

Date