SIGN PERMIT APPLICATION

Town of Cedar Bluff, Alabama

Phone (256) 779-6121 Fax (256) 779-6148

Applicant's Name: _____

Phone: _____ Fax: _____

Address: _____

Name of Business: _____

Sign Address: _____

Sign Contractor's Name: _____

Phone: _____ Fax: _____

Address: _____

Received by _____

Date _____

Permit # _____

Zone _____

Proposed sign is for:
- ☐ New Business
- ☐ Existing Business
- ☐ Replace Existing Sign
- ☐ Refurbish Existing Sign

Materials sign will be made of: _____

_____

Will sign be lighted:
- ☐ Interior
- ☐ Exterior
- ☐ No

Overall dimensions of sign:
- Width _____
- Height _____
- Depth _____

Attach a sketch of sign drawn to scale of proposed sign including graphics that sign will contain and a plot of where sign will be located on property. Footing for sign will need to be inspected by Building Inspector before pouring concrete .

	Owner	**Lessee**
Name		
Address		
City/St/Zip		
Phone		
Email		

I hereby certify the owner of record authorizes the proposed work and / have been authorized by the owner to make this application as his authorized agent and we agree to conform to all applicable laws of the Town of Cedar Bluff. / hereby attest all statements made on this application are true to the best of my knowledge. Applicants are advised that the making of a false statement on this form is a criminal offense.

Signature of applicant _____ **Date** _____

Signature of owner _____ **Date** _____