

# SIGN PERMIT

OWNER'S NAME \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
(LOCATION OF WORK)

CONTRACTOR'S NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE: \_\_\_\_\_ email: \_\_\_\_\_

TYPE OF SIGN:     \_\_\_ New     \_\_\_ Replacement     \_\_\_ Reface  
\_\_\_ Freestanding (Pole Mounted)     \_\_\_ Wall Mounted     \_\_\_ Temporary     \_\_\_ Canopy  
\_\_\_ Projecting     \_\_\_ Other (Please describe : \_\_\_\_\_)

**\* A SITE PLAN SHOWING THE PROPOSED LOCATION OF THE SIGN OR SIGNS SHALL BE SUBMITTED WITH THE APPLICATION.**

**\*\* SPECIFICATIONS AND SCALE DRAWINGS SHOWING THE MATERIALS, DESIGN, DIMENSIONS, STRUCTURAL SUPPORTS, HEIGHTS AND ELECTRICAL COMPONENTS OF THE SIGN(S) SHALL BE SUBMITTED WITH THE APPLICATION.**

**\*\*\*SIGN PERMIT COST IS \$50.00 plus \$5.00 Technology Fee\*\*\***

***All lights/lighted signs require an electrical permit***

*I hereby agree to conform to all applicable Town of Red Springs Ordinances.*

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

***For office Use:***  
***Total Fee Paid:*** \_\_\_\_\_ ***Receipt#:*** \_\_\_\_\_

***Issued by:*** \_\_\_\_\_ ***Date:*** \_\_\_\_\_

**Please provide a sketch that includes the dimensions of the proposed (or existing) sign.**