

Sign Permit Application

Permit #: **SIG-** _____

Insp. Area: _____

Job Valuation: \$ _____

Required Information:

Zoning:	DR-PB / PUD / SC:	P / ZA File:	
Sign Address:		APN#	

Sign Applicant: (Property Owner or Licensed Contractor)

Name:		E-mail:	
Address:		Phone:	

Contractors License #:		Class:
Tenant Bldg. Frontage	lineal feet	Parcel Street Frontage
	lineal feet	

Sign Tag I.D. Number	Attached(A) Detached(D)	Height	Width	Sign Area (SF).	Illumin. (Y or N)	Sign Copy
S						
S						
S						
S						
S						
S						
S						
S						
S						
S						

Required Plan Review Approval:	Structural	Electrical	Design Review
	Approved By		Date
10	Footings		
29	Signs-Building Final		
79	Signs-Electrical Final		
N/A	Special Inspection		

FEES				Submittal Fee: \$100.00 per application
				Total Sign Permit Fees: See Development Fee Schedule
Cashier	Fee Type	Date	Amount	
	Sign Application Fee			
	Other			
	Sign Fee Balance			
TOTAL				

Inspection Line: (916) 808-7622

Approved by: _____
 X _____
 Date: _____

THIS SIGN PERMIT SHALL EXPIRE BY LIMITATION IF WORK AUTHORIZED IS NOT COMMENCED WITHIN 60 DAYS

Please note that once this application is submitted to the City of Sacramento, your information may be subject to public record; however, the City will not sell your data or information for any purposes.