

THE TOWN OF GEORGETOWN

P.O. BOX 426
GEORGETOWN, CO 80444-0426
303-569-2555

SIGN PERMIT APPLICATION

APPLICANT NAME: _____ PHONE # _____

MAILING ADDRESS: _____

PROPERTY OWNER: _____
(if different)

SIGN LOCATION: _____ ZONING DISTRICT: _____

ESTIMATED VALUE OF SIGN \$ _____

LINEAL FOOTAGE – FRONT OF BUSINESS _____ SIDE OF BUSINESS _____
(if applicable)

TOTAL EXISTING SIGNAGE FOR THIS BUSINESS: _____ square feet
Itemize by Type: Wall _____ sq. ft. Window _____ sq. ft.
Projecting _____ sq. ft. Freestanding _____ sq. ft.
Other _____ sq. ft.

TOTAL NEW SIGNAGE FOR THIS BUSINESS: _____ square feet
Itemize by Type: Wall _____ sq. ft. Window _____ sq. ft.
Projecting _____ sq. ft. Freestanding _____ sq. ft.
Other _____ sq. ft.

IS THE SIGN ILLUMINATED? _____ If so, describe _____

DISTANCE BETWEEN BOTTOM OF SIGN(S) AND GROUND FOR EACH SIGN, NEW AND EXISTING:
Sign Type _____ Distance _____ Sign Type _____ Distance _____
Sign Type _____ Distance _____ Sign Type _____ Distance _____

LIST OF MATERIALS TO BE USED FOR SIGNS: _____

PLEASE INCLUDE THE FOLLOWING:

- 1. **Detailed drawing of sign**, including all **Dimensions** and details of lighting, if any.
- 2. Show how and where the sign is to be placed on the structure or property. Include elevation or site plan.

Signature of Owner or Contractor Town Administrator Approval

Date Received _____ Sign Permit # _____
Fees - Sign Permit - \$20 Plan Review \$20 DRC _____ Total \$ _____