SIGN PERMIT

City Of Independence

Historic Approval_____
Use Zone_____
Fire Zone_____
Variance _____
Conditional Use _____

555 S. Main Street
P.O. Box 7
Independence, Oregon 97351

Permit No. _____
Permit Fee _____
Admin Fee _____
Surcharge _____
Total _____

Sign For: _____
(Business Name)
Business Address: _____

Telephone: _____

Contractor: _____

Address:_____

Telephone: _____

Permit to: [ ] Erect [ ] Alter [ ] Relocate

Type of Sign: [ ] Wall Sign [ ] Freestanding Sign [ ] Roof Sign

[ ] Projecting Sign [ ] Pole Sign [ ] Barber Pole

[ ] Marquee Sign [ ] Wall Facade for Sign [ ] Street or Wall Clock

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Details of Construction, Installation, and Illumination of Sign

Horizontal Dimension: _____

Vertical Dimension: _____

Area of Sign:_____

Removal Agreement Signed _____

Height to Bottom: _____

Height to Top: _____

Illumination _____**UL#** _____

Planning Action _____

Sign Installation to be Completed within 180 Days After Permit Has Been Issued:

Sign Sketch

Electrical Connection And All Supply Circuits To Be Made By Licensed Electrical Contractor Subject To Provisions Of The State Electrical Code:

Applicant's Signature: _____ **Date:** _____

Application Received By: _____ **Date:** _____

Permit Issued by:_____ **Date:** _____