



# SIGN PERMIT

**City of Independence**  
 555 S. Main St./ P.O. Box 7  
 Independence, OR 97351  
 Phone 503-838-1212 / Fax 503-606-3282  
 Inspection Line 503-837-1199 (Mon-Thur)  
[permits@ci.independence.or.us](mailto:permits@ci.independence.or.us)

OFFICE USE ONLY	
Permit #:	Permit Fee: \$
Date Received:	Building Permit Fee: 13.00
Date Issued:	Surcharge (12%):
Received By:	Total: \$
Issued By:	

## SIGN DETAILS

Request to:  Erect  Alter  Relocate Sign(s)

Business Name:

Address:

## BUSINESS OWNER/APPLICANT

Name:

Mailing Address:

City: State: Zip:

Phone: Cell: Email:

## CONTRACTOR

Name: CCB #:

Phone: Cell: Email:

## SIGN DETAILS

Type of Sign(s) (i.e. projecting, freestanding, wall):

Sign Material:

Is the Sign in the Historic District?  Yes  No (If yes, Historic Preservation Commission approval may be required)

Horizontal Dimension: Height (Above Ground) to Top:

Vertical Dimension: Height (Above Ground) to Bottom:

Sign Area: Illumination: UL#:

## REQUIRED SUBMITTALS

- A photo or drawing showing the location of the proposed sign(s).
- A photo or drawing showing the design of the proposed sign(s).
- A description of:
  1. The method used to attach the sign(s) to the ground or a building, including all relevant structural requirements to ensure the stability of the signs.
  2. Details associated with any illumination or electrification of the sign. Please note: electrical connection and all supply circuits require a permit through Polk County.
- Written consent from the property owners where the use will be located, if not the applicant.
- Sign Permit fee.
  - 0-35 SF (\$60 + permit fee)  36-60 SF (\$90 + permit fee)  61-100 SF (\$160 + permit fee)  101-150 SF (\$200 + permit fee)

## SIGNATURE

*I certify that the information submitted is true, and I have read the standards of this application.*

Authorized Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_