

TOWN OF WALLINGFORD

APPLICATION FOR SIGN PERMIT

FEE: \$90.00

APPLICATION #: _____ (Name of Company Installing Sign – Please Print)

Name of Applicant: _____ Phone: (____) _____
(Party Applying for Permit – Please Print)

Address: _____
(Street) (City) (State) (Zip)

Name of Business: _____
(Business where sign will be located)

Address of Business: _____ Wallingford, CT 06492

Building Frontage: _____ Leased/Rented Frontage: _____
(At main entrance/One side only) (In linear feet) (In linear feet/tenant space only)

Zoning District: _____ Total Sign Area Allowed: _____
(In square feet)

SIGN INFORMATION

NUMBER AND TYPE OF SIGNS:

Type of Sign	Number of Signs	Sq.Ft. of New Signs	Number of Replacement Signs	Sq.Ft. of Replacement Signs	Number of Existing Signs	Sq.Ft. of Existing Signs	Total Sq.Ft. of Signs on Site
Ground/Pole							
Wall							
Other							

Will sign(s) be illuminated? Yes [] No [] If yes, how? _____
(Internal/External)

REQUIRED INFORMATION

1. Provide a list of all existing signs; indicate size. A photo survey is STRONGLY recommended.
2. Provide drawings or a sketch of the proposed sign(s); indicate size and quantity.
3. Provide a drawing or sketch indicating where sign(s) will be located on the property or building.

Applicant's Signature: _____

FOR OFFICIAL USE:

Date Submitted: _____ Fee Paid: _____ Date Approved: _____

Revised: September 2, 2011