



CITY OF CHERRYVILLE SIGN PERMIT

_____ **FREE STANDING SIGN**

FEE: \$ _____

_____ **WALL SIGN**

_____ **OTHER**

_____ Applicant

_____ Sign Permit Number

_____ Address

_____ PID #

_____ City, State, Zip

_____ Zoning District

Address where sign is to be constructed: _____

Wall Sign:

Free Standing Sign:

_____ # of signs

_____ # of signs

_____ wall area

_____ sign area

_____ % of wall area covered

_____ ft. from right of way

_____ sq. ft. of sign(s)

_____/_____
ht. b/of sign, ht. t/of sign

_____ ht. bottom of sign

_____ building from right of way

_____ height of top of sign

_____ ft. from side lot lines



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ATTACH THE FOLLOWING:

1) For Free-standing and ground mounted signs, two (2) copies of a scaled dimensional drawing showing all property lines, right-of-way lines; and the exact shape and dimensions of the lot on which the sign is to be located. On this drawing, the applicant shall sketch the proposed location of the sign.

2) A message side elevation drawing of the sign showing height from ground to bottom and top of sign, dimensions of sign and sign support structure.

Comments and/or other information: _____

APPLICANT

DATE

Based on the information hereby provided to me and my knowledge of the City of Cherryville Zoning Ordinance, I hereby:

APPROVE

DISAPPROVE

This zoning permit

ZONING ADMINISTRATOR

DATE